## POH000103936

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	WAIT	MAIL
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: A + H OF POMPANO INC  (Name of Corporation)  DOCUMENT NUMBER: PO 4000 10 3 9 3 6
(Name of Corporation)
DOCUMENT NUMBER: PO Y000 (03 9 3 6
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
JUDY SUBACHAN
TUDY SUBACHAN (Name of Person)
A++ OF POMPANO (Name of Firm/Company)
(Name of Firm/Company)
SOI SW 2ND PL (Address)
(Address)
Pompano BEACH/FL/33060
(City/State and Zip Code)
For further information concerning this matter, please call:
Judy Subactar at (954) 782-8903  (Name of Person) (Area Code & Daytime Telephone Number
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address:  Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ANDY SUBACH	AN	, hereby resign as	UTCE PRESIDENT (Title)
of <u>4+++ 0F</u>	PomPANO (Name of Corpor	±√ C	1
Poyooo 103 936 (Document Number, if know	, a corp	poration organized under	er the laws of the State of
FLORIDA	······································		
		2	12.4
	Awy/	of resigning officer/director	12 PM to
	(3.5		5 5 T

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314