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When I

Amendment Section Division of Corporations TO:

SUBJECT: LIZAS ISting Com (Name of Corporation)
DOCUMENT NUMBER: P04000114645
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donna Dickers  (Name of Person)
(Name of Firm/Company)
M34 Snadeville (Address) Pd
Claw ORdine F1 32327 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) Sat (850) 524-0473 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Amendment Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Donna Dickers, hereby resign as Vice President
of Lisasisting Com Co. (Name of Corporation)
PO4000114645, a corporation organized under the laws of the State of (Document Number, if known)
- Florida
(Signature of resigning officer/director)  AUG -3  AUG -4  AUG

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

FILING FEE IS \$35.00

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