

P04000118017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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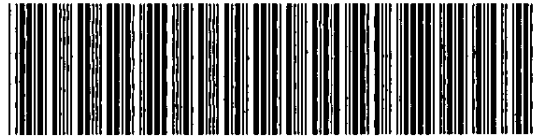
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

cc
sgg
Resign

SEP 12 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Alternative Medical Technology Enterprise, Inc
(Name of Corporation)

DOCUMENT NUMBER: P04600118017

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laurie + Steve Sanders
(Name of Person)

Principal Address of Company
(Name of Firm/Company)

3480 Southern Orchard Road, East
(Address)

Davie, FL 33328
(City/State and Zip Code)

For further information concerning this matter, please call:

Laurie Sanders at (954)
(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

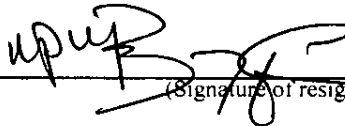
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Mary BERGQUIST, hereby resign as TREASURER
(Title)

of Alternative Medical Technology Enterprise, Inc
(Name of Corporation)

P04000118017, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILING FEE IS \$35.00

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08 SEP 10 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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