(Requestor's Name)		
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COVER LETTER

AHC AMERICA	N HOSPITALITY CONSULTANTS & OUTSOURCING
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER:	• • •
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing
Please return all corresponden	ce concerning this matter to the following:
MURAT BALLICA	
(Name o	f Person)
AHC AMERICAN HOSPIT	ALITY CONSULTANTS &
(Name of Fig	m/Company)
3850 WASHINGTON STR	EET APT 1009
(Add	ress)
HOLLYWOOD, FL 33021-	7356
(City/State a	nd Zip Code)
For further information concer	ning this matter, please call:
MURAT BALLICA	at (954) 893-0868
(Name of Person	at (954) 893-0868 (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

TO:

Amendment Section Division of Corporations



OFFICER / DIRECTOR RESIGNATION MAR 16 PM 3: 20 FOR A CORPORATION

I, SIMA MOLHO	, hereby resign as VICE PRESIDENT	
	(Time)	
Co	WSUCTA NTS	
of AHC AMERICAN HOSPITALITY & OUTSOURCING INC.		
	Corporation)	
P05000001343 , a (Document Number, if known)	corporation organized under the laws of the State of	
FLORIDA		
(Sign	ature of resigning officer/director)	

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