## P05000027166

(Requestor's Name) (Address)	50016219300
(Address)	
(City/State/Zip/Phone #)	,
PICK-UP WAIT MAIL	
(Business Entity Name)	11/02/0901016806 *
(Document Number)	11/02/0301016006 *
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EXAMINER

## **COVER LETTER**

**Amendment Section** 

**Division of Corporations** 

TO:

Marosch S/W CONSULTING CORP SUBJECT (Name of Corporation) P05000027166 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Oliver Huttner (Name of Person) Management Tax Consulting, Inc. (Name of Firm/Company) P.O. Box 101718 (Address) Cape Coral, FL 33910-1718 (City/State and Zip Code) For further information concerning this matter, please call: Oliver Huttner (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section
Division of Corporations Amendment Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Rolf Schiller	, hereby resign as VP
7	(Title)
of MAROSCH S/W CONSULT	,
(Na	me of Corporation)
P05000027166 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	(Signature of resigning officer/director)
	SECOND -2
Make checks payab	le to Florida Department of State and mail to

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