## P05000055203

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800067084348

03/06/06--01038--003 \*\*52.50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

My Parison.

S. Coulliette MAR 1 5 2006

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	H TEAM Inc.
DOCUMENT NUMBER: P050000	55203
The enclosed Articles of Amendment and fee are	:
Please return all correspondence concerning this n	natter to the following:
Sharon	Contact Person)
(Name of C	Contact Person)
LOH TE	EAM, INC.
(Firm/	Company)
4718 W	ingrove Blud
(n	FC 32819
(City/ State	/ and Zip Code)
For further information concerning this matter, pl	ease call:
Sharon Lott (Name of Contact Person)	at (467) 247-3224  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, FL 32399

Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Mark Lott, hereby resign as Vice-	Pres	·	
of	Lott TEAM, INC (Name of Corporation)	·	1	
P	DS 000055203 a corporation organized under the laws of the (Document Number, if known)	e State of		
	FLORIDA.			
	(Signature of resigning officer/director)	TALLAHASSEE, FLORID	2006 MAR - 6 AM 8: 4	FILED

## 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