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Amendment Section Division of Corporations

TO:

SUBJECT: ZARBO SCHLICHTIN	NG & ASSOCIATES, INC.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P0500	00058153
	nation for a Corporation and fee are submitted for filing
Please return all correspondence con-	cerning this matter to the following:
JOSEPH J. ZARBO, JR	
(Name of Perso	n)
ZARBO SCHLICHTING & ASSO	CIATES, INC.
(Name of Firm/Con	npany)
4020 KIDRON ROAD SUITE 7	
(Address)	
LAKELAND, FLORIDA 33811	
(City/State and Zip	Code)
For further information concerning the	nis matter, please call:
JOSEPH J. ZARBO, JR	at (863) 701-8462 (Area Code & Daytime Telephone Number)
(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

FILED

07 FEB 23 PM 12: 20

FOR A CORPORATION FOR A CORPORATION FOR A CORPORATION SECRETARY OF STATE TALLAHASSEE, FLORIDA

LAURA JOHN C. SCHLICHTING	G, hereby resign asTREASURER
	(Title)
of ZARBO SCHLICHTING	
	(Name of Corporation)
P05000058153	, a corporation organized under the laws of the State of
(Document Number, if know	n)
FLORIDA	

(Signature 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