P05000070288

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Entry Name)	
(Document Number)	
(Document Number)	
D 100 100 1	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	Ì
	-
	ı





600061323306

11/14/05--01051--011 **35.00

OS NOV 14 PM 4: 11

02/1/02

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: NCOA-I Incorporated (Name of Corporation) DOCUMENT NUMBER: POSOOOO70288
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lisa Teti (Name of Person)
NCOA-I Incorporated (Name of Firm/Company)
21000 Boca Rio Rd suite 12 A (Address).
Boca Raton, Fl 33433
For further information concerning this matter, please call:
John Koutsoupis at (T61) 414-5888 (Name of Person) at (T61) 414-5888 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. John Koutsoupis, hereby resign as Vice	= President
of NCOA-I Incorporated	
POSODO OTO 288. a corporation organized under the law (Document Number, if known)	s of the State of
	OS NOV II
(Signature of resigning officer/director)	ILED III PH I: I TARY OF STAT ASSEE, FLORI

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