

PD5000143029

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(Address)

(Address)

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TALLAHASSEE, FL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AVLR INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** PO5000143029

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABRAHAM KATZMAN  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

2565 NW 52<sup>nd</sup> STREET  
(Address)

BOCA RATON, FL 33496  
(City/State and Zip Code)

For further information concerning this matter, please call:

ABRAHAM KATZMAN at ( 561 ) 988-5425  
(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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

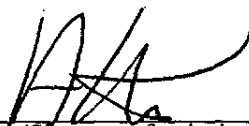
FILED  
06 MAY -8 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, ABRAHAM KATZMAN, hereby resign as DIRECTOR  
(Title)

of AVLR INC.  
(Name of Corporation)

POS000143029, a corporation organized under the laws of the State of  
(Document Number, if known)

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