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COVER LETTER

Divis	ion of Corporat	ions .		
SUBJECT:	MiL	Deguall	Secolists (Name of Corporat	Tre

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

Please return all correspondence concerning this matter to the following:

Michael John Fife Ski
(Name of Person)

Mil Definal Secondsto Inc
(Name of Firm/Company)

1487 Sanshara Da, # 105
(Address)

Cassebary Fl. 32707
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael John Fifelski at (407) 209-9583 (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

Acron Sandim



TO:

Amendment Section

DOCUMENT NUMBER:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Louis	Postore	_, hereby resign as	Special (Title)	
of M+L	Bryws LL (Name of Corpora	Specin-list	ine	
(Document Nu	mber, if known)	oration organized under the law	s of the State of	
((Signature o	of resigning officer/director)	CRETARY OF STANASSEE, FLO	

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

KAREN S. INDIVERI

MY COMMISSION # DD 188235

EXPIRES: February 25, 2007

Bonded Thru Notary Public Underwriters

Gladour Kanen Samdiur