## P05000155153

(Re	equestor's Name)	<u> </u>
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ві	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: AVEIS, INC	
	(Name of Corporation)
DOCUMENT NUMBER:	P05000155153
The enclosed Officer/Director F	Resignation for a Corporation and fee are submitted for filing
Please return all correspondence	e concerning this matter to the following:
IGOR GOUDOVITCH	
(Name of	Person)
(Name of Firm	n/Company)
1174 CHESTNUT ST	
(Addr	ess)
NEWTON, MA 02464	
(City/State an	d Zip Code)
For further information concern	ing this matter, please call:
IGOR GOUDOVITCH	at ( 781 ) 630-3300 (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

SECRETARY OF STATE OIVISION OF CORPORATIONS

07 SEP 24 AM 9: 33

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## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, IGOR GOUDOVITCH	, hereby resign as_	SECRETARY	
·,	, nereby resign as_	(Title)	
of_AVEIS, INC	of Corporation)		
(Name C	or Corporation)		
P05000155153	, a corporation organized un	nder the laws of the State of	
(Document Number, if known)			
FLORIDA			
		for bondovile	4
11/1/8	ignature of resigning officer/direc	ctor)	
		9/20/0+	

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