## P05000158698

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Special Instructions to Filing Officer:			
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Office Use Only



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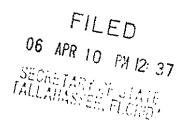
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUB.	JECT: INTACT COMMERCE, INC.
	(Name of Corporation)
DOC	CUMENT NUMBER: P05000158698
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
VIC	TOR D. SEVILLIA
	(Name of Person)
INT	ACT COMMERCE, INC.
	(Name of Firm/Company)
200	1 ATLANTIC SHORES BLVD. SUITE # 518
	(Address)
HAI	LANDALE, FL 33009
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
VIC	TOR D. SEVILLIA at ( 954 ) 457-8562  (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Divis Clifto 2661	Mailing Address: Amendment Section ion of Corporations on Building Executive Center Circle bassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, ARIEL SEVILLIA	, hereby resign as SECRETARY
7	(Title)
of_ INTACT COMMERCE, INC	,
(Name	of Corporation)
P05000158698	a corporation organized under the laws of the State of
(Document Number, if known)	1 0
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