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COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: ELIZABETH BENNETT INVESTIGATIONS, INC. (Name of Corporation) |
|--|
| |
| DOCUMENT NUMBER: P05000162366 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| JAMES A BENNETT, Se |
| (Name of Person) |
| ELIZABETH BENNETT INVESTIGATIONS, INC |
| (Name of Firm/Company) |
| 2196 SPANISH BLUFF DR |
| (Address) |
| JACKSONVILLE, FLORIDA 32225 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| ELIZABETH BENNETT at (904) 219-6191 (Name of Person) (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 |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| OFFICER / DIRECTOR RESIGNATION | N |
|---|--|
| FOR A CORPORATION | OB SEP 35 |
| | N OBSEP 25 PH 12: 20 |
| JAMES A BENNETT , hereby resign as VICE | PRESIDENT OF STATE |
| | (Title) |
| of ELIZABETH BENNETT INVESTIGATIONS, INC . (Name of Corporation) | ······································ |
| P05000162366, a corporation organized under the (Document Number, if known) | laws of the State of |
| FLORIDA . | |

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