P06000039389

(Requestor's Na	ime)
(Address)	
(Address)	
(law oss)	
(City/State/Zip/F	Phone #)
PICK-UP WAI	T MAIL
(Business Entity	y Name)
(Document Nun	nber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Officer	r:

Office Use Only



300081061293

10/23/06--01061--018 **35.00

FILED

06 OCT 23 PN 2: 37

SECRETARY OF STATE ALLAHASSEE FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SHAM LEASE INC (Name of Corporation) DOCUMENT NUMBER: P060000 29389
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MAThew B. MILLER Could You please Asso (Name of Person) Correspond with me AT.
SHAM LEASE INC. 211 5. 13th St. (Name of Firm/Company) Phila. PA. 19107
25/1 PARK STREET And you Mullsonly
LAKE WORTH FL. 33220 (City/State and Zip Code)

For further information concerning this matter, please call:

MAHLEW G MILLER at (267) 997-6237
(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

I, MAHhew B. MILLER, hereby resign as President)— Title)	
of SHAM LEASE INC.		
(Name of Corporation) P0600029389 a corporation organized under the laws of the (Document Number, if known)	e State of	
FLORIDA		
	SECRE	3 8 TI
JANHON 10/17/0	最影品 1988年	T 23 PM
(Signature of resigning officer:director)	FLORID	2: 37

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