

FB6000046/80

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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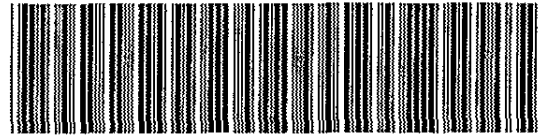
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAB OF SARASOTA, INC
(Name of Corporation)

DOCUMENT NUMBER: P 06 0000 46180

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

Please return all correspondence concerning this matter to the following:

DEBRA A. BANUCHE
(Name of Person)

DAB OF SARASOTA, INC
(Name of Firm/Company)

3773 TARP L
(Address)

SARASOTA, FL 34232
(City/State and Zip Code)

For further information concerning this matter, please call:

DEBRA A. BANUCHE at (941) 544-4065
(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**

FILED
06 NOV -6 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, BROOKS LINDE, hereby resign as SECRETARY
(Title)

of DAB OF SAPASOTA, INC
(Name of Corporation)

P 06000046180, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Brooks Linde 10/15/06
(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