

PO6000071705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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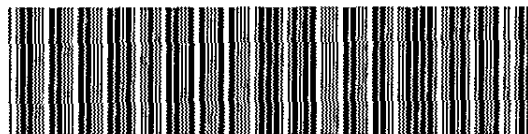
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: T.E.A.M. PLACEMENT CONSULTING INC.

(Name of Corporation)

DOCUMENT NUMBER: P06000071705

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

Please return all correspondence concerning this matter to the following:

ALTINA STRACHAN

(Name of Person)

T.E.A.M. PLACEMENT CONSULTING INC

(Name of Firm/Company)

1604 NE 18TH ST

(Address)

FT. LAUDERDALE, FL 33304

(City/State and Zip Code)

For further information concerning this matter, please call:

MARGURETTA W. HUMES

(Name of Person)

at (954) 245-8015

(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, ALTINA STRACHAN, hereby resign as PRESIDENT
(Title)

of T.E.A.M. PLACEMENT CONSULTING, INC
(Name of Corporation)

P06000071705, a corporation organized under the laws of the State of
(Document Number, if known)

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

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