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(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	02/12/0701018007 **35.00 TALLAHASSEE.FLORIDA TALLAHASSEE.FLORIDA
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Pryor Experience, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P06000084280

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

Please return all correspondence concerning this matter to the following:

Sharon Morgan

(Name of Person)

William N. Asma, P.A.

(Name of Firm/Company)

884 South Dillard Street

(Address)

Winter Garden, Florida 34787

(City/State and Zip Code)

For further information concerning this matter, please call:

 Sharon Morgan
 at (407) 656-5750

 (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

RESIGNATION

I, BILLIE JO BELTON, hereby tender my resignation as Vice President of PRYOR EXPERIENCE, INC. this <u>31</u> day of <u>January</u> 2007.

BILLIE JO



Document Number P06000084280

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