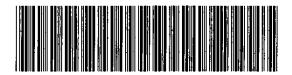
P06000093472

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Amendment Section Division of Corporations

TO:

SUBJECT: Bayside IT Consu	Iting, Inc.
P0	(Name of Corporation) 96000093472
DOCUMENT NUMBER: Pu	
The enclosed Officer/Director Re	signation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
E. Kenyon Rice III	
(Name of Po	erson)
Bayside IT Consulting, Inc.	
(Name of Firm/	Company)
3111 W. Dr. MLK Blvd, Suite	100
(Addres	s)
Tampa, FL 33607	
(City/State and 2	Zip Code)
For further information concerning	g this matter, please call:
E. Kenyon Rice III	at (813) 624-8747 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	, hereby resign asVP, S, T	(T'AL-)
Develde IT Consulting les		(Title)
of Bayside IT Consulting, Inc.		,
(Nan	ne of Corporation)	
P0600093472 (Document Number, if known)	, a corporation organized under the law	s of the State of
Florida	·	
	(Sign/fune of resigning officer/director)	
	(SESTANTINAS SECONDARY SECO
	FILING FEE IS \$35.00	20 S 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314