

P06000100735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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11-6-06

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A&T Check Cashing Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** PO6000100735

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ale Bryan  
(Name of Person)

A&T Check Cashing Services, Inc.  
(Name of Firm/Company)

1404 NW 6th Ave.  
(Address)

Pompano Beach, FL 33060  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ale Bryan at (954) 785-5048  
(Name of Person) (Area Code & Daytime Telephone Number)

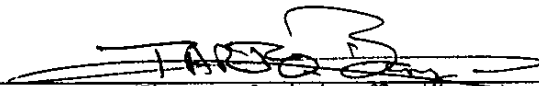
Enclosed is a check made payable to the Florida Department of State for ~~\$87.50~~ for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**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, TARIQ BAZYAN, hereby resign as SECY/TRES  
(Title)  
of A & T Check Cashing Services, Inc  
(Name of Corporation)  
PO6000100735, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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