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COVER LETTER

TO: Amendment Section Division of Corporations

atso's (Name of Corporation) SUBJECT:

DOCUMENT NUMBER: _____ P06000136941

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

Please return all correspondence concerning this matter to the following:

(Name of Person 30'5 Name of Firm/Company 10 (City/State and Zip Code)

For further information concerning this matter, please call:

727 576-5542 (Area Code & Daytime Telephone Number) at ((Name of Person)

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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

J Dolgracco, hereby resign as residen easures I,

atso's of

 $\overline{T_{\Lambda C}}$ (Name of Corporation)

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Signature of Hesigning officer/director) 90 NON 29 П ¥

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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