

P06000143847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

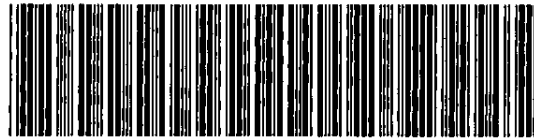
(Business Entity Name)

(Document Number)

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04/25/07--01048--001 **35.00

FILED
2007 APR 25 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: APPLIED RESULTS, INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000143847

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

TIM J DUEMIG

(Name of Person)

(Name of Firm/Company)

6590 SW 5TH STREET

(Address)

MARGATE, FL 33068

(City/State and Zip Code)

For further information concerning this matter, please call:

TIM J DUEMIG

(Name of Person)

at (954) 972-6377

(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**

FILED

2007 APR 25 PM 1:05

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, TIM J DUEMIG, hereby resign as CTO
(Title)

of APPLIED RESULTS, INC.
(Name of Corporation)

P06000143847, 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