P07000003742

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OD Resign.

DEC 0 8 2009

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: INTEGRATED BUSINESS DEUELOPMENT
(Name of Corporation)
DOCUMENT NUMBER: P0700000 3742
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
PATRICIA LANE (Name of Person)
(Name of Person)
NTEGRATED BUSINESS DEVELOPMENT (Name of Firm/Company)
(i tamb of i time company)
PO.BOX 126 (Address)
(Address)
Powassan on POH1ZO (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
PATRICIA LANE at (705) 724-3773 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ROBERT L. LANE, hereby resign as UICE PRE.	Siden Title)	<u> </u>	***************************************
of INTEGRATED BUSINESS DEVELOPMENT, I	INC.		_,
(Document Number, if known), a corporation organized under the laws of the corporation of	he State o)f	م مدرد، او
Florida			
(Signature of resigning officer/director)	SEARETARY OF STA	09 DEC -2 AM 10: 3	

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