

PO7000021787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

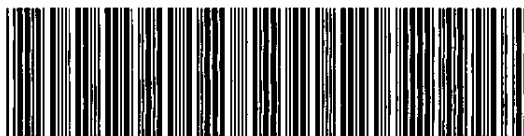
(Business Entity Name)

(Document Number)

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11/02/09--01026--001 \*\*35.00

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AND  
FILED  
09 NOV -2 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/13/09  
TL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Debt Management Counseling Center, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000021787

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

Please return all correspondence concerning this matter to the following:

Michael Bradford

(Name of Person)

Debt Management Counseling Center, Inc

(Name of Firm/Company)

413 NE 3rd St, Suite 202

(Address)

Delray Beach, FL 33483

(City/State and Zip Code)

For further information concerning this matter, please call:

Randall Leshin

(Name of Person)

at ( 800 ) 689-9026

(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

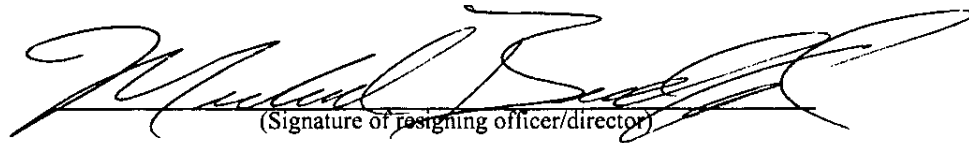
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Michael Bradford, hereby resign as President  
(Title)

of Debt Management Counseling Center, Inc  
(Name of Corporation)

P07000021787, 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

09 NOV - 2 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVE  
AND  
FILED