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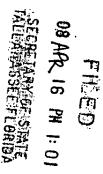
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COVER LETTER

Division of Corporations
SUBJECT: ELLB INC. (Name of Corporation)
DOCUMENT NUMBER: P07000032507
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
LAURENCE L. MILL (Name of Person)
(Name of Firm/Company)
P.O. Box 1281 (Address)
MALIANDALE BEACH & 33008 (City/State and Zip Code)
For further information concerning this matter, please call:
AUNENCE L. MILL at (954) 559-5707 (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

l,	LAMPENCE	L. U.LL	, hereby resign a	s VICE PAR	55 (DE~ 7 (Title)	<u>-</u>
of	ELLB.	[Name of Corp	poration)			,
Pc	70000 32 S		orporation organized	under the laws of	the State o	f
	FLORIBA	<u> </u> .				
		Dauses (Signatur	Me. A. M. re of resigning officer/dir	Quector)	- Secret	9 AP
		FII IN	C FFF 18 \$35 00		ACTO STATE	TIONS.

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314