(Re	equestor's Name)	
(Ac	ddress)	
,	,	
(Ac	dress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
•	_	
Special Instructions to	Filing Officer:	





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05/27/08--01008--012 **35.00

officer Resignation
TB 1-2-08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PHASIT, INC. (Name of Corporation)
DOCUMENT NUMBER: P070000 48 4 16
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)
(Name of Firm/Company)
110 5w 108 AVE APT H1 (Address)
MIAMI, FL 33174 (City/State and Zip Code)
For further information concerning this matter, please call:
KEVINCEDENO (Name of Person)at (305) 746 - 8271 (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, KEVIN L.	CÉDENO	, hereby resign as_	VICE -	PRESIDEN (Title)	T
of PHASIT,	(Name of C	Corporation)			,
PO 7 0000 4 (Document Numb	18 41 6 , a per, if known)	a corporation organized un	der the laws	of the State of	
FLORIDA	·				
_	(Signa	ature of resigning officer/direc	tor)	2008 MAY 27 PM 1: 20 SECRETARY OF STATE TALLAHASSEE. FLORI	FILED

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 Fallahassee, Florida 32314