P0700054687

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2009 JUN -9 AH 11: 25

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: LEVERAGE CONNECTIONS INC.
	(Name of Corporation)
DOC	UMENT NUMBER: P07000054687
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Mar	y Jo Spalinger
	(Name of Person)
BUS	SINESS FILINGS INCORPORATED
	(Name of Firm/Company)
8040	D Excelsior Drive #200
	(Address)
Mad	ison, WI 53717
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Mary	Jo Spalinger at (608) 827-5300 x254
	(Name of Person) at (608) 827-5300 x254 (Area Code & Daytime Telephone Number)
Enclos or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 5.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amend Division Clifton 2661 F	Mailing Address: dment Section on of Corporations on Building Executive Center Circle assee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sect	tions 607.0502(2), 617.0502(2), 607.1509, o	r 617.1509,		
Florida Statutes, the undersigned, BUSINESS FILINGS INCORPORATED				
(Name of Registered Agent)				
hereby resigns as Registered Agent for LEVERAGE CONNECTIONS INC.				
, , ,	(Name of Corporation)			
P07000054687				
(Document Number, if known))			
A copy of this resignation was ma	ailed to the above listed corporation at its las	st known address.		
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the	date on which		
	*			
_ Wa	(Signature of Resigning Agent)	2009 JUN SECRET		
	(Signature of Resigning Agent)			
If signing on behalf of an entity:		SS AR		
Mary Jo Spa	alinger			
	(Typed or Printed Name)	AM II: 25 E. FLORIDA		
Asst. Sec for	r Business Filings Incorporated	•		
 	(Capacity)			

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314