

PO7000/35545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off Resign
Thurs
3-17-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABSOLUTE MEDIA EXPOSURE
(Name of Corporation)

DOCUMENT NUMBER: P07000135545

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

Please return all correspondence concerning this matter to the following:

LEITH, LES
(Name of Person)

ABSOLUTE MEDIA EXPOSURE
(Name of Firm/Company)

8549 MANASSAS RD
(Address)

TAMPA, FL 33635
(City/State and Zip Code)

For further information concerning this matter, please call:

LES LEITH at (407) 341-6161
(Name of Person) (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**

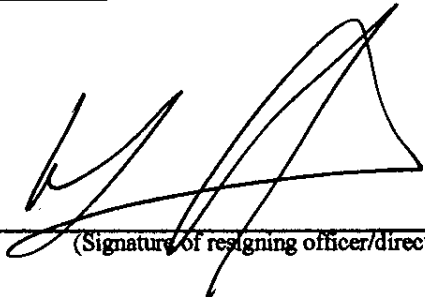
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, URS LEITH, hereby resign as CFO
(Title)

of ABSOLUTE MEDIA EXPOSURE INC
(Name of Corporation)

PD7000135545, 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