P08000005157

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to	Filing Officer:	





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02/02/09--01018--007 **35.00

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off. Resign.

TR 7-5-09

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Comm Flow IT BUSINESS Solutions (Name of Corporation) DOCUMENT NUMBER: \$\int 0.800005157
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Killian Likan Zot (Name of Person)
Committee IT Business Salutions (Name of Firm/Company)
11560 Sw 148 Court
Miawi 15 3319 (City/State and Zip Code)
For further information concerning this matter, please call:
Roger Salandy at (305) 992-5500 (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Lellian L. Lanzor	, hereby resign as	VICE - PA	le SI dent	
of CommPow IT	Business poration)	Solution	ons Con	P
P080000 5757 ,a c (Document Number, if known)	orporation organized und	er the laws of the	State of	
Florida		٠	7.11	
Sellano (Signatu	are of resigning officer/director	gu C	SECRETARY OF STATES	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 Tallahassee, Florida 32314