P08000020242

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	· .
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE
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off. Resign.

TB 3/18/09

COVER LETTER ..

Amendment Section Division of Corporations

TO:

SUBJECT: Better Branch Bus	(Name of Corporation)
DOCUMENT NUMBER: P0	8000020242
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
Susan Simon	
(Name of Pe	erson)
Better Branch Business, Inc.	
(Name of Firm/C	Company)
5810 Coral Ridge Drive 120	
(Address	3)
Coral Springs, FL 33076	
(City/State and 2	Zip Code)
For further information concerning	g this matter, please call:
Susan Simon	at (805) 558-1881
(Name of Person)	at (805) 558-1881 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade 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

	DIRECTOR RESIGNA A CORPORATION	ATION	RECRETARY AND
I, Andrew Santoli	, hereby resign as_	President	(Title) (Title)
of Better Branch Business, Inc.	Commonation		
(Name of	Corporation)		
P08000020242 (Document Number, if known)	a corporation organized un	der the laws	of the State of
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