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(Re	questor's Name)			
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SECHETARY OF STATE

8 AUG II PM

B. McKnight AUG 12 2008

COVER LETTER

TO: Amendment Section Division of Corpor	
SUBJECT: T.A.T. Solut	ions Corp.
	(Name of Corporation)
DOCUMENT NUMBER	:
The enclosed Officer/Direction	ctor Resignation for a Corporation and fee are submitted for filing
Please return all correspon	dence concerning this matter to the following:
Osvaldo Roche	
(Nai	ne of Person)
T.A.T. Solutions Corp.	
(Name o	f Firm/Company)
1263 Lucaya Cir.	
	(Address)
Orlando, Florida 32824	
(City/St	ate and Zip Code)
For further information co	ncerning this matter, please call:
Osvaldo Roche	at (407) 451-9475 (Area Code & Daytime Telephone Number)
(Name of P	erson) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$3	5.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Cle Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Kiara Rivera	, hereby resign as T		_
		(Title)	
of T.A.T. Solutions Corp.			,
(Nai	me of Corporation)		
(Document Number, if known)	, a corporation organized under the laws	s of the State of	
Florida	•		
Kurc	(Signature of resigning officer/director)	08 AUG 11 PM 3: 21 SECRETARY OF STATE TALLAHASSEE FLORIDA	APPHOVED

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