P08000059084

(Requestor's Name)		
(Nequestor's Name)		
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(City/State/Zip/Phone #)		
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COVER LETTER

	Amendment Section Division of Corporations
SUBJE	ARMS Partners Inc
	(Name of Corporation)
DOCU	MENT NUMBER: P08000059084
The end	closed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
Neil D	PiRico •
	(Name of Person)
ARMS	S Partners Inc
	(Name of Firm/Company)
11026	3 150th Ct N
	(Address)
Jupite	er, FL 33478
	(City/State and Zip Code)
For furt	her information concerning this matter, please call:
Andrea	a DiRico at (561) 543-8715 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose	ed is a check for \$35.00 made payable to the Florida Department of State.
Amendr Division Clifton 1 2661 Ex	Address: ment Section n of Corporations Building Recutive Center Circle Steep FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2000 AUG 11 PM 2: 15

SECHETARY OF STATE TALLAHASSEE, FLORIDA

I, Christopher Kellogg	, hereby resign as VP, Secretary, Director
	(Title)
of ARMS Partners Inc	
(Name of	Corporation)
P08000059084 (Document Number, if known)	a corporation organized under the laws of the State of
(Document Number, II known)	
Florida	
	•
2	Hello
(Sig	nature 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