

P08000082089

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(Address)

(City/State/Zip/Phone #)

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*Mr. [Signature]*

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 JUL -8 PM 4:17

T. Roberts JUL 13 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Alpha Zen Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** 708000082089

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

Please return all correspondence concerning this matter to the following:

WILSON SANTOS  
(Name of Person)

Alpha Zen Inc  
(Name of Firm/Company)

4131 Southside Blvd, suite 205  
(Address)

JACKSONVILLE, FL 32216  
(City/State and Zip Code)

For further information concerning this matter, please call:

WILSON SANTOS at ( 904 ) 998-9977  
(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**

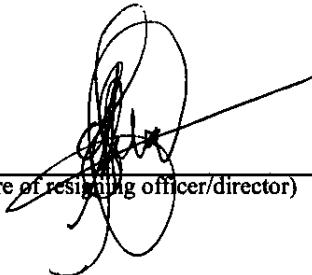
**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**  
**09 JUL -8 PM 4: 17**

I, Ana P. Andescavage, hereby resign as V P (Title)

of Alpha Zen Inc.  
(Name of Corporation)

P08000082089, a corporation organized under the laws of the State of  
(Document Number, if known)

\_\_\_\_\_

  
\_\_\_\_\_  
(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