P09000012695

(Re	equestor's Name)								
(Ad	dress)								
(Ad	ldress)								
(City/State/Zip/Phone #)									
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PICK-UP	☐ WAIT	MAIL							
(Bu	siness Entity Nan	ne)							
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Certified Copies	Certified Copies Certificates of Status								
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Special Instructions to	Filing Officer:								
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Office Use Only



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Op/Did Resign

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2 Roberts MAY 2 1 2010

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: THINK-E

P09000012695 **DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Name of Firm/Company)

WOODFIELD CT,
(Address)

COCONUT CREEK, FL- 33073
(City/State and Zip Code)

For further information concerning this matter, please call:

SIRAJ KASMANI at (954) 6829784

(Name of Person) (Area Code & Daytime Telephone Number)

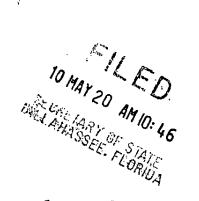
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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



I,	SIRAJ	EASMAN	/ I , he	ereby resign as_	VICE	PRESID	DENT
						(Title)	
of_	THINK-	E CONSI	ULTING of Corporation)				,
f	090000 (Document Num	12695	• ,	•	nder the law	s of the State of	
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	_			Mello			
	-	(6	Signature of resid	oning officer/direct	otor)		

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