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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: AMALGAMATEN BUS_INESS SOLUTIONS, INC. (Name of Corporation) DOCUMENT NUMBER: P09000022822 (12-MAR-09)
DUCUMENT NUMBER: 1 0 100000000000000000000000000000000
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Manusaras Bustiess Souttons, The (Name of Firm/Company)
1636 E. HILLEREST STREET, STE 201 (Address)
ORLANDO, FL 32806 (City/State and Zip Code)
For further information concerning this matter, please call:
TRAUTS A. Morsswier at (407) 489-6054 (Name of Person) (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, RONALD C	1040	_, hereby resign as_	PRÉSZOR.	تر (itle)
of AMALLAMA	TED BUSSIN	UF55 SOLUT ion)	TONS, I	UC
P090000 22823 (Document Number, if kn	own) , a corpo	oration organized un	der the laws of th	e State of
FLOR FDA	·			
	R. Tosse	ent flor		
	(Signature of	resigning of the redirect	or)	O9 APA SECRETA
	FILING I	FEE IS \$35.00		TILED LIG AN 9 (ARY OF STATI SSEE FLORID

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to: