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SECRETARY OF STATE
TALL AMASSEE FLORIDA

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: STORM (OMPUTER SERVICES AND EVENTS CORPORTION)

DOCUMENT NUMBER: PO9000033321

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

Please return all correspondence concerning this matter to the following:

RADICL MAIA

(Name of Person)

STORM (OMPUTER SERVICES AND EVENTS CORPORTION Firm/Company)

SSID COMMODITY CIR SIE 17

(Addiess)

ORLANDO FL 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

RADICL MAIA

(Name of Person)

at (407) 733 8644

(Name of Person)

reet Address: Mailing Ad

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

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

ZORGOCT 22 AM 8:59
TALLAHASSEE. FLORIDA

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, SALMERON CARDOSO/CEAB, hereby resign as PRESIDENT	
of STORY COMPUTER SERVICES AND EVENTS (Name of Corporation)	
209 0000 33324 a corporation organized under the laws of the Sta	
(Document Number, if known)  FLORIDA	
(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