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Amendment Section TO: **Division of Corporations**

BUSINESS SOLUTIONS, INC. (Name of Corporation) SOCIATED SUBJECT: **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:

ENNETH J. MANTUO

(Name of Firm/Company)

158TWOOD LANE 16630 W

WESTON FL 33326 (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (954) 655-7506 (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, NENNETH J. MANTUU, hereby resign as____ (Title)

SSOCIATED BUSINESS (Name of Corporation) INC. SOLUTIONS

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

ning 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