

P09000094089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

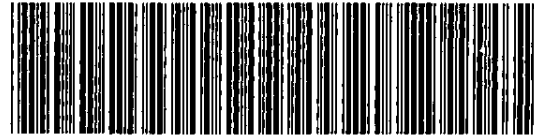
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign.

TB 1-21-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IMMIGRATION PARTNERS, INCORPORATED
(Name of Corporation)

DOCUMENT NUMBER: P09000094089

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

Please return all correspondence concerning this matter to the following:

BRINSLEY M.A. ELLIOTT, Sr.

(Name of Person)

IMMIGRATION PARTNERS, INCORPORATED

(Name of Firm/Company)

3155 North West 42nd Street

(Address)

Lauderdale Lakes, Florida 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

BRINSLEY M.A. ELLIOTT, Sr.

at (954) 714-6888

(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**

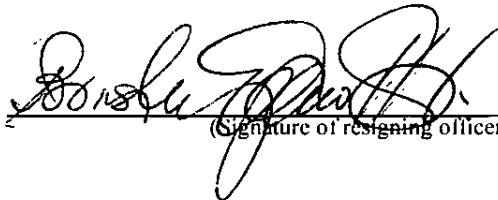
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2011 JAN 18 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, BRINSLEY M.A. ELLIOTT, Sr., hereby resign as President
(Title)

of IMMIGRATION PARTNERS, INCORPORATED,
(Name of Corporation)

P09000094089, a corporation organized under the laws of the State of
(Document Number, if known)

P09000094089


(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