P10000028775

(Re	equestor's Name)	
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T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MCU EXPERT INC	
	(Name of Corporation)
DOCUMENT NUMBER: P10	000028775
The enclosed Officer/Director Resi	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	oncerning this matter to the following:
STEVE SUROWINSKI	
(Name of Per	son)
(Name of Firm/Co	ompany)
39 DUNDAS AVE	
(Address)	•
WARWICK, RI 02889	
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
STEVE SUROWINSKI	at (954) 643-5483 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	de 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

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



, hereby resign as PRESIDENT	
(Title)	
zed under the laws of the State of	
1 er/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