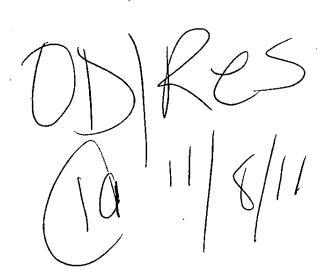
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. (Re	questor's Name)	
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Special Instructions to	Filing Officer:	
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: PALM BEACH DOMESTIC EMPLOYMENT, INC.
(Name of Corporation)
DOCUMENT NUMBER: P10000081738
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ROBERT WYNER
(Name of Person)
PALM BEACH DOMESTIC EMPLOYMENT, INC.
(Name of Firm/Company)
249 PERUVIAN AVENUE, SUITE F-4
(Address)
PALM BEACH, FL 33480
(City/State and Zip Code)
For further information concerning this matter, please call:
ROBERT WYNER at (561) 659-0000 (Area Code & Daytime Telephone Number)
(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

DAVID PINTO	hereby recion ac	Director/President/Secretary
1,		(Title)
of_PALM BEACH DOMESTIC EMPLOYM		
(Name of Corpora	ition)	
P10000081738	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
(Signature o	of resigning officer/direct	SECRETARY OF SIDIVISION OF CORPOR-

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