

P100000086857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PTC SOLUTIONS INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P10000086857

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

Please return all correspondence concerning this matter to the following:

Karen E. PHILLIPS-POHL

(Name of Person)

PTC SOLUTIONS INC.

(Name of Firm/Company)

PO BOX 2435

(Address)

PALM CITY, FLORIDA 34991

(City/State and Zip Code)

For further information concerning this matter, please call:

KAREN E. POHL-PHILLIPS

(Name of Person)

at ( 772 ) 626-4444

(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

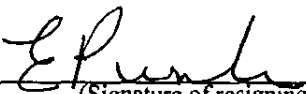
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ELIZABETH RAMOS-REALIN, hereby resign as SECRETARY  
(Title)

of PTC SOLUTIONS INC.  
(Name of Corporation)

P10000086857, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
11 APR 11 AM 9:31  
RECEIVED  
TALLAHASSEE, FLORIDA

**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