DI 0000003073

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	•





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08/08/12--01016--005 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MD Cellular Communications Fre (Name of Corporation)
DOCUMENT NUMBER: P1100003073
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Tom Brosseo (Name of Person)
(Name of Person)
Flasted Phones . Je T (Name of Firm/Company)
(Name of Firm/Company)
3823 Tamiam: Trail BAST UNIT 555 (Address)
(Address)
Naples Fl 341/2 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tom Brossco at (866) 966-6602 (Name of Person) (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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Jesse mame	טגיווט	, hereby resign as_	Presiden T		
		-	(Title)		
•		1			
of MD Cellular	Communic	ATIONS INC			_
	(Name of Corpo	ration)			,
P110000 3073 (Document Number, if known	, a cor	poration organized und	der the laws of the	e State of	
Florida				71	
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				2812 AUG	**** <u>+</u> **.
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	Y			5	A. Property
	(Signature	of resigning officer/direct	or)	[S	

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