

P1100009190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

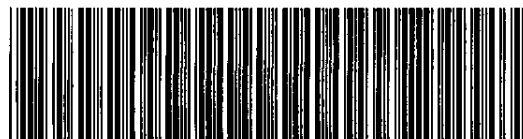
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800207654698

05/17/11--01014--011 **35.00

Handwritten signature and date: 5-24-11

FILED
2011 MAY 17 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TAX SOLUTIONS INC
(Name of Corporation)

DOCUMENT NUMBER: P11000009190

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

Please return all correspondence concerning this matter to the following:

MELKI DELLACIAN
(Name of Person)

TAX SOLUTIONS
(Name of Firm/Company)

2750 N. 29th Ave STE 116
(Address)

HOLLYWOOD, FL 33020-1516
(City/State and Zip Code)

For further information concerning this matter, please call:

MELKI DELLACIAN at (561) 308 0707
(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

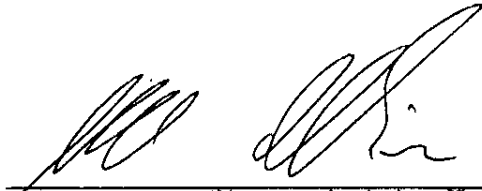
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MELKI DELLALIAN, hereby resign as VP
(Title)

of TAX SOLUTIONS INC,
(Name of Corporation)

P11000009190, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
2011 MAY 17 AM 10:19
SECRETARY OF STATE
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