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COVER LETTER

Ecosystem Management, Inc. (Name of Corporation) DOCUMENT NUMBER: The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Charles G. Strazzulio (Name of Person) Ecosystem Management, Inc. (Name of Firm/Company) 7970 Chaucer Drive (Address) Spring Hill, FL 34607 (City/State and Zip Code) For further information concerning this matter, please call: Charles G. Strazzullo (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section

Division of Corporations Post Office Box 6327

Tallahassee, FL 32314

Street Address:

Clifton Building

Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

[, _	Elizabeth Strazzullo	, hereby resign as_	Treasurer	(Title)	FOR STATE OF THE PARTY OF THE P
of_	Ecosystem Management, Inc.	oration)			,
Flo	(Document Number, if known) orida	orporation organized un	der the laws	of the State	of

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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