## P9800025141

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasilioss Lilaty Hailie)
(Document Number)
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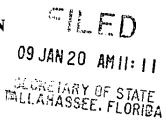
## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	MICBRO. HEARI	NG AID CENTER, INC.		
		(Name of Co	rporatio	on)
DOCUMENT	NUMBER:	P98000025141		
The enclosed (	Officer/Director R	esignation for a Corpora	ation an	d fee are submitted for filing
Please return a	Il correspondence	concerning this matter	to the fo	ollowing:
DIONNE BLA	ESING, ESQ			
	(Name of I	Person)		
BLAESING	& DIAZ, PA			
	(Name of Firm	/Company)	—	
5946 MAIN	STREET			
	(Addre	SS)		
NEW PORT	RICHEY, FL 34652			
	(City/State and	Zip Code)		
For further info	ormation concerni	ng this matter, please ca	ıll:	
DIONNE BLA		at ( 727	)	846 1802
	(Name of Person)	(Area (	Code &	846 1802 Daytime Telephone Number)
Enclosed is a c	heck for \$35.00 n	nade payable to the Flori	ida Dep	partment of State.
Street Address Amendment Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FI	ection rporations g Center Circle	Mailing Address: Amendment Section Division of Corpora Post Office Box 63 Tallahassee, FL 32	ations 27	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I,	Rayana V. Piesco	, hereby resign as Director and Officer			
´ -		(Title)			
of	MicBro. Hearing Aid Center Inc.				
-	(Name of Corporation)				
	P98000025141	, a corporation organized under the laws of the State of			
	(Document Number, if known)				
	FLORIDA	·			

(Signature of resigning officer/director)

RAYAJA PUSCO

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