P99000006901

(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:				





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ECRETARY OF STATE

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COVER LETTER

TO: Amend Divisio	ment Section on of Corporations	
SUBJECT: ^A	\dvantage Inform	nation Systems, Inc .
		(Name of Corporation)
DOCUMENT	NUMBER: P	9900006901
The enclosed (Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please return a	ll correspondence	concerning this matter to the following:
Ann Malone		
· · · · · · · · · · · · · · · · · · ·	(Name of F	'erson)
Advantage I	nformation Syste	
· · ·	(Name of Firm	(Company)
10001 NW 5	i0 Street	
	(Addre	ss)
Sunrise, FL		·
	(City/State and	Zip Code)
For further inf		ng this matter, please call:
Ann Malone		at (954) 653-0981 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a c	check for \$35.00 m	nade payable to the Florida Department of State.
Street Addrest Amendment Solivision of Co Clifton Buildir 2661 Executive Tallahassee Fl	ection rporations ig e Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

* 7.5

. Gerald Slott	, hereby resign as_	President	resident PLORIDA	
	,,		(Title)	
of Advantage Information Syst	ems, Inc			
(Na	me of Corporation)			
P9900006901	a cornoration organized un	orporation organized under the laws of the State of		
(Document Number, if known)	, a vorporation organized an	der die laws		
Florida				
	 -			

(Signature of resigning officer/director)

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