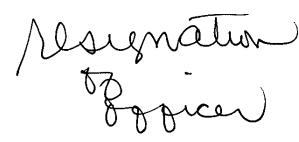
V34994

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



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10/11/07--01025--012 **35.00



10/17/07

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: A.S. A. MF6, INC. (Name of Corporation)
DOCUMENT NUMBER: V34994
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Todd DuPlcssis (Name of Person)
A.S.A. MF6, INC. (Name of Firm/Company)
14879 SW 111 th Street (Address)
Dunnellon FL 34433 (City/State and Zip Code)
For further information concerning this matter, please call:
Tocid DuPlessis at (352) 465-0236 (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 FILED

2007 OCT 11 PM 3: 20

I, Julie Zunich	TALLAHASSEE. FLORIDA, hereby resign as
of A.S.A. MF6.	/N C. me of Corporation)
V34994 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	

ignature 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