K30509

(R€	equestor's Name)	
(Ad	ldress)	
(Ad	(dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Gu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

(10, 8,29,07



800108570038

08/24/07--01041--004 **70.00

07 AUG 24 AM 11: 56

COFER LETTER

SUBJECT: Strawberry Ridge, Inc. (Name of Corporation)	٠
DOCUMENT NUMBER: K30509	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Julie V. Fanelli	
(Name of Person)	
Strawberry Ridge, Inc.	
(Name of Firm/Company)	
11300 4th Street North Suite 200	
(Address)	
St. Petersburg, FL 33716	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Julie V. Fanelli at (727) 577-5522 (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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Darian W. Johnson	, hereby resign as Vice President	
	(Title)	
of Strawberry Ridge, Inc.		
	me of Corporation)	-
K30509	, a corporation organized under the laws of the State of	
(Document Number, if known)		=
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