199402

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COVÉR LETTER

Amendment Section Division of Corporations

TO:

•	
SUBJECT: RAINDROP PROD	DUCE, INC.
	(Name of Corporation)
DOCUMENT NUMBER: L99	9402
The enclosed Officer/Director Res	ignation for a Corporation and fee are submitted for filing
Please return all correspondence co	oncerning this matter to the following:
Burke L. Randa	
(Name of Pe	rson)
Burke L. Randa, P.A.	
(Name of Firm/C	Company)
37 North Orange Avenue, Suit	te 500
(Address	
Orlando, Florida 32801	
(City/State and Z	ip Code)
For further information concerning	g this matter, please call:
Burke L. Randa	at (407) 365-4300
(Name of Person)	at (407) 365-4300 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	de 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 FOR A CORPORATION

, hereby resign as Director
(Title)
of Corporation)
_, a corporation organized under the laws of the State of
SECRETARY OF STATE TALLAHASSEE, FLORIDA

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