

PD1000109206

(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:

Office Use Only

12/17/03
12/18/03



200025488632

12/17/03--01032--004 **35.00

FILED

03 DEC 17 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Your Wedding Dance, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P01000109206

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nuran Gokturk

(Name of Person)

(Name of Firm/Company)

629 SE 19 Ave. #402

(Address)

Deerfield Beach, Florida 33441-5000

(City/State and Zip Code)

For further information concerning this matter, please call:

Nuran Gokturk

(Name of Person)

at (954) 419-9224

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Nuran Gokturk, hereby resign as V.P., Director, eff. 10-10-03
(Title)

of Your Wedding Dance, Inc.
(Name of Corporation)

P01000109206, 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

03 DEC 17 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED