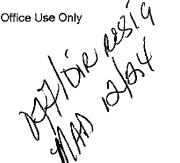
## P01000109206

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

## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUB.	JECT: Your Wedding Dance, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P01000109206
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Nur	an Gokturk
	(Name of Person)
	(Name of Firm/Company)
629	SE 19 Ave. #402
	(Address)
Dee	rfield Beach, Florida 33441-5000
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Nura	an Gokturk at ( 954 ) 419-9224  (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis P.O. 1	ing Address: Independent Section Identify Section Identif

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Nuran Gokturk	, hereby resign as V.P., Director, eff. 10-1 <b>0</b> -03
~7	(Title)
of_Your Wedding Dance, Inc.	
(N	me of Corporation)
P01000109206 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
1 Jun	an Coltuk
	(Signature of resigning officer/director)  TALLARY  ASSE
	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