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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I YEAR, COCKY	, hereby resign as_	DIRECTOR	
		(Title)	
01 ,	INC -		?
0	ame of Corporation)		
(Document Number, if known)	, a corporation organized und	der the laws of the State of	
FLORIDA			*
			7
	(Signature of resigning officer/directors	IALLAHASSEE, FLORIC	51 ED

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