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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
Certified Copies	Certificates	s of Status			
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02/04/13--01055--009 **35.00





TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: RAVEE /NTERNATIONAL Croep, NC (Name of Corporation) DOCUMENT NUMBER: P09000030909
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PANISHREE HISTY
RAVEE WIEWATIONAL Crop, WC (Name of Firm/Company)
1700 N. 42~D AVE
$\frac{1}{10 \text{ LC} + \text{ K/OO})} = \frac{(\text{Address})}{(\text{City/State and Zip Code})}$
For further information concerning this matter, please call:
$\frac{\sqrt{. C_{\text{Heff}}}}{\sqrt{\text{Name of Person}}} \text{ at } (\frac{305}{\text{Area Code & Daytime Telephone Number}})$

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

1. SHANE	KESAVALY	harahy ragion as	MANAC	SER_
	WTERNATIO		```	,
	(Name of Corneration	1)	,	•
P 9 9 0000 3 0 (Document Number, if	known) , a corpora	tion organized u	nder the laws of the	State of
1_LORIVA	·			
	(Signature of re	signing officer/dire	ctor)	

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