

P94000045506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

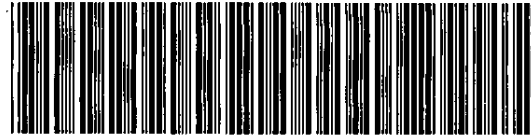
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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old Resignation

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TODLEE CORP.  
(Name of Corporation)

**DOCUMENT NUMBER:** P94000045506

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

Please return all correspondence concerning this matter to the following:

**Hope Powell**

(Name of Person)

**Todlee Corp**

(Name of Firm/Company)

**9 Tintagel Way**

(Address)

**Rexford, NY 12148**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Michael Susser**

(Name of Person)

at ( **904** ) **226-4585**

(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Hope Powell, hereby resign as DVP - Vice President  
(Title)

of TODLEE CORP.  
(Name of Corporation)

P94000045506, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

 12-5-2013  
(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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