

PO9000034859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

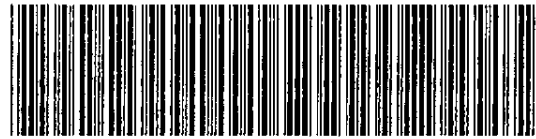
(Business Entity Name)

(Document Number)

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APPROVED
AND
FILED
11 MAR 14 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO
2/15/11
TL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGNATION OF OFFICER _____
(Name of Corporation)

DOCUMENT NUMBER: P09000034859 _____

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

Please return all correspondence concerning this matter to the following:

ESMEILE OMER _____

(Name of Person)

1 STOP FOOD MART INC _____

(Name of Firm/Company)

445 S PARK AVE _____

(Address)

TITUSVILLE, FL 32780 _____

(City/State and Zip Code)

For further information concerning this matter, please call:

ESMEILE OMER _____

(Name of Person)

at (321) 264-4940

(Area Code & Daytime Telephone Number)

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BEKRY SEMAN, hereby resign as PRESIDENT
(Title)

of 1 STOP FOOD MART INC
(Name of Corporation)

P09000034859, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

11 MAR 14 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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