232713

·		
(Ke	questor's Name)	
(Ad	ldress)	
(*		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	'
		•
PICK-UP	☐ WAIT	MAIL
	•	
(Bu	siness Entity Name)	
•	, , ,	
(Do	cument Number)	
Certified Copies	Certificates of	Status
r		·····
Special Instructions to	Filing Officer:	}
,		

Office Use Only



100135053411

09/08/08--01024--005 **35.00

08 SEP -8 PM 2: 57

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

DD R 25 a 9/11/08

COVER LETTER

SeaEscape Entertainment, Inc. (Name of Corporation) 232713 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Judith A. Jarvis, Esq. (Name of Person) Law Offices of Judith A. Jarvis, P.A. (Name of Firm/Company) 1260 East Oakland Park Blvd., Suite 200 (Address) Fort Lauderdale, FL 33334 (City/State and Zip Code) For further information concerning this matter, please call: Judith A. Jarvis 954) 873-6294 (Area Code & Daytime Telephone Number) (Name of Person) 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

CR2E044(08/05)

TO:

Amendment Section
Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Judith A. Jarvis	, hereby resign as SVD	
	(Title)	
of_SeaEscape Entertainment, In		
(Nam	e of Corporation)	_ ′
(Document Number, if known)	, a corporation organized under the laws of the State of	
Florida	 ·	
	Fignature of resigning officer/director)	SECRETARY OF STATE

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