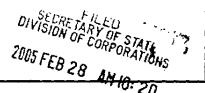
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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: CONARK, INC.	
(Name of Corporation)	
DOCUMENT NUMBER: 479071	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing	ıg
Please return all correspondence concerning this matter to the following:	
MARY ELLEN CANAL	
(Name of Person)	
CONARK, INC.	
(Name of Firm/Company)	
600 NORTH MASHTA DRIVE	
(Address)	
KEY BISCAYNE, FL 33149	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
MARY ELLEN CANAL at (305) 361-5831	
MARY ELLEN CANAL at (305) 361-5831 (Name of Person) (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



I. ARMANDO J. CANAL	, hereby resign as SECRETARY
	(Title)
of CONARK, INC.	
(Name o	of Corporation)
479071 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	<u>.</u> .
(Si	gnature 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