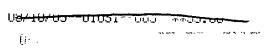
## 852507

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<u>:                                    </u>
Special Instructions to Filing Officer:	
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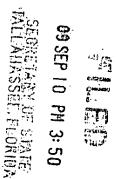
Office Use Only



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09/10/09--01031--005 \*\*35.00



Of Reserved C.COULLIETTE

SEP 14 2009

EXAMINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: NEELS COMPANY INC (Name of Corporation)
DOCUMENT NUMBER: 852507
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
AMAL QAHHAT
(Name of Person)
NEEIS CON PANY (MANAGER) (Name of Firm/Company)
1172 SOUTH DIXIE HWY # 360 (Address)
Coral, Garles Fl. 33146 (City/State and Zip Code)  For further information concerning this matter, please call:
AMAL QAHHAT at ( 305 ) 522-5594  (Name of Person) (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 Clifton Building Clifton 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

Ĭ, _	PABLO ELSACA HIRMAS	, hereby resign as_	VICE	PRESIDENT	DIRE	CTOR	
				(Title)			
of_	NEELS COMPANY IN	C (Corporation)				<del></del> ,	
	ec 2 (87	, a corporation organized und	ier the l	aws of the St	ate of		
	FLORIDA						
	PABLO ELSACA HI	gnature of resigning officer/directors 08/03/2009	or)	<del></del>	SECKETARY OF STATE	69 SEP 10 PM 3: 50	Supplied to the supplied to th

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