

F 06000005019

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

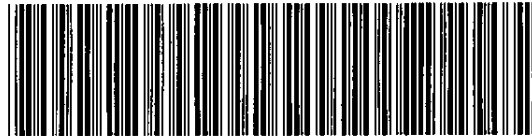
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200310107942

RECEIVED  
DEPARTMENT OF STATE  
18 MAR 26 AM 11:41

FILED  
2018 MAR 26 AM 8:51

C. GOLDEN

MAR 27 2018

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302  
155 Office Plaza Dr Ste A Tallahassee FL 32301  
PHONE: (800) 435-9371; FAX: (866) 860-8395**

---

**DATE: 3/26/18**

**NAME: NETWORK F.O.B., INC**

**TYPE OF FILING: OFFICER / DIRECTOR RESIGNATION**

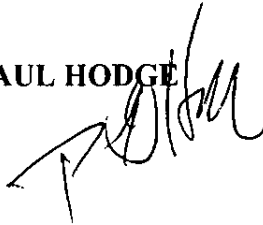
**COST: 35.00**

**RETURN: PLAIN COPY PLEASE**

---

**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED

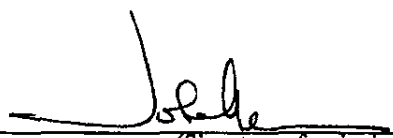
2018 MAR 26 AM 8:51

I, JOHN KOLDEN, hereby resign as VP  
(Title)

of NETWORK F.O.B., INC.  
(Name of Corporation)

F06000005019, a corporation organized under the laws of the State of  
(Document Number, if known)

Minnesota

  
(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