

F74992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

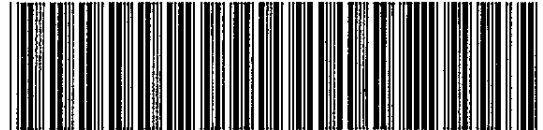
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T BROWN APR - 5 2005

Minor Resignation

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kaelbel Wholesale, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F74992

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

Please return all correspondence concerning this matter to the following:

MAUREEN A. KAE LBEL

(Name of Person)

Kaelbel Wholesale, Inc.

(Name of Firm/Company)

2501 SW 31 Street

(Address)

Fort Lauderdale, Florida 33312

(City/State and Zip Code)

For further information concerning this matter, please call:

Maureen Kaelbel

(Name of Person)

at (954) 736 1365 ext 127

(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**

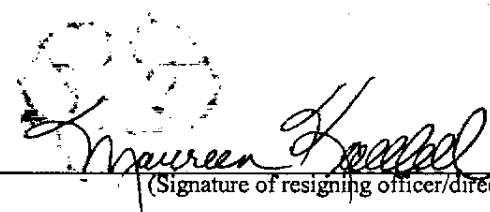
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05 MAR 28 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MAUREEN A. Kaelbel, hereby resign as VICE pRESIDENT/TREASURER
(Title)

of Kaelbel Wholesale, Inc.
(Name of Corporation)

F74992, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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