

F990000006084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

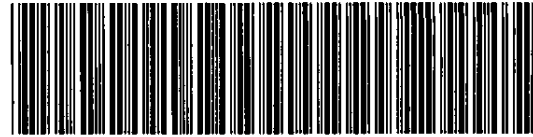
(Business Entity Name)

(Document Number)

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05/19/14--01026--010 **122.50

Resignation
Officer

FILED
2014 MAY 19 PM 4:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

DR
6/4/14
Off/Din Resign

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Innovaro, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F99000006084

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

Please return all correspondence concerning this matter to the following:

Carole R Wright
(Name of Person)

Innovaro, Inc.
(Name of Firm/Company)

2109 E. PALM AVE
(Address)

Tampa, FL 33605
(City/State and Zip Code)

For further information concerning this matter, please call:

ASA LANUM at (813) 754-4330 x223
(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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED

2014 MAY 19 PM 4:06

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

I, Carole R Wright, hereby resign as DFO
(Title)

of Innovaro, Inc.
(Name of Corporation)

F99000006084, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Carole R Wright
(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