J66003

-		
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
	-	
<u> </u>		
Special Instructions to	Filing Officer:	
	,	
·		

Office Use Only 1



200133974662

08/13/08--01023--006 **35.00

FILED

OR AUG 13 AM ID: 37

SECTIONALY OF STATE

OF LINE STATE STATE

OF LINE STATE STATE

OF LINE STATE STATE

OF LINE STATE STATE

OF LINE STATE

OF LINE

A. WAN

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Damian Christopher, Inc.
(Name of Corporation)
DOCUMENT NUMBER: J66003
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Roger Ladd
(Name of Person)
Damian Christopher, Inc.
(Name of Firm/Company)
15402 N Nebraska Ave
(Address)
Lutz, FL 33549
(City/State and Zip Code)
For further information concerning this matter, please call:
Roger Ladd at (813) 615-1760 Ext 123 (Name of Person) (Area Code & Daytime Telephone Number)
(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 2661 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

, hereby resign as Secretary	
(Title)	
,	
rporation)	
corporation organized under the laws of the State of	
OB AUG 13	
urc 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