N0100002482

(F	Requestor's Name)	,, <u></u>
(4	Address)	
	Address)	
(0	City/State/Zip/Phone ≠	Ð
		MAIL
(E	Business Entity Name)
	Document Number)	······································
Certified Copies	Certificates o	f Status
Special Instructions to	o Filing Officer:]
-		
! •		
	Office Use Only	



02/14/05--01021--015 **35.00

FILED 05 FEB 12 AN ID: 40 ALLANASSEE, FLORID

It off

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

, t

271.05

SUBJECT: CEDAR OAK LODGE, INC. (Name of Corporation) DOCUMENT NUMBER: NO100002482, FEI 593711852

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

Please return all correspondence concerning this matter to the following:

Name of Person)
(Name of Firm/Company)
3040 DAILEY EDAD (Address)
(City/State and Zip Code)

For further information concerning this matter, please call:

at (32 NLX. elephone Number) Jame of

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

I, LAURA A FATTER Deard _____, hereby resign as__ (Title) EDAVE OAL UNIE, IN of oration) _____, a corporation organized under the laws of the State of if known) FURIDA 12 AM 10:4 m 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