

1001000008611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

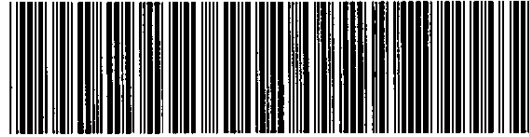
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 32399

APPROVED  
AND  
FILED

CP/15/10  
11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** New World Celts, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N01000008611

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

Please return all correspondence concerning this matter to the following:

Michael Dunlap  
(Name of Person)

New World Celts, Inc.  
(Name of Firm/Company)

P.O. Box 362  
(Address)

Dunedin, FL 34697  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Dunlap at ( 727 ) 288 - 6704  
(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

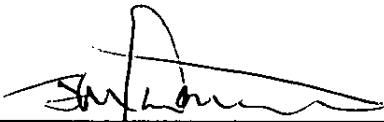
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, J. Michael Davis, hereby resign as Treasurer  
(Title)

of New World Celts, Inc.  
(Name of Corporation)

N01000008611, 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

10 JUL 15 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA