N040009620

| (Requestor's Name) |
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| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: $ff - B - OK$, $fn C$ (Name of Corporation) |
| DOCUMENT NUMBER: N 04000096 20 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Clarborne Christian |
| (Name of Firm/Company) |
| 906 Black Knight Dr |
| City/State and Zip Code) 38 59 4 |
| For further information concerning this matter, please call: |
| Claubork Christian at (813) 985-6284 (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

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Arres A

05 DEC -5 PM 3:59

FALLAHASSEE. FLORIDA

| I, Karew W. Christian, hereby resign as <u>secretary</u> |
|---|
| of $\frac{1}{1}$ OK $\frac{1}{1}$ (Name of Corporation) |
| NOY0000620 Document Number, if known). a corporation organized under the laws of the State of |
| Horida. |
| |

(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