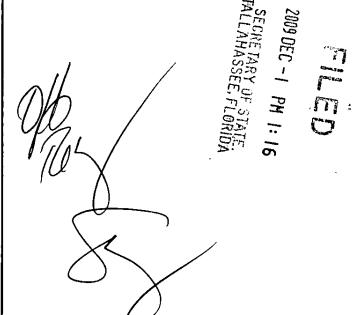
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
1 (Document Number)
Certified Copies; Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



700163115507

12/01/09--01017--013 \*\*70.00



## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, DEN MOEHNERT, hereby resign as Dilegen (Title)	-
of CHANDIAN Angél Dog Résive, tac.,	
Nogologo 5074 a corporation organized under the laws of the State of (Document Number, if known)	
<u></u>	
SECREIT TALLAHA	r was
(Signature of resigning officer/director)	m

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