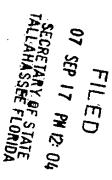
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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09/17/07--01027--001 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Half Moon Lions Club Inc. (Name of Corporation)
DOCUMENT NUMBER: # 28438
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Barbara Satter (Name of Person)
(Name of Firm/Company)
P.O. Bat 1930 (Address)
Silver Springs - Flarila 34489 (Otty/State and Zip Code)
For further information concerning this matter, please call:
Laskers Satter at (352) 625-672/ (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Sartara J. Batte	, hereby resign as Secretary
V	of Corporation)
# 28438	of Corporation) _, a corporation organized under the laws of the State of
(Document Number, if known) I Sarida	_·

(Signature of resigning officer/director)

O7 SEP 17 PN 12: 04
SEGRETARY OF STATE
TAEL'AHASSEE FLORIDA

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