

N99000002457

Requester's Name



500003502635--5  
-12/15/00--01079--021  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- Walk in
- Pick up time
- Certified Copy
- Certificate of Status
- Mail out
- Will wait
- Photocopy

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

*N99000002457*  
*OK*  
*12-15-00*  
*OK*  
*230*

Examiner's Initials

**OFFICER / DIRECTOR RESIGNATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 DEC 15 AM 10:03

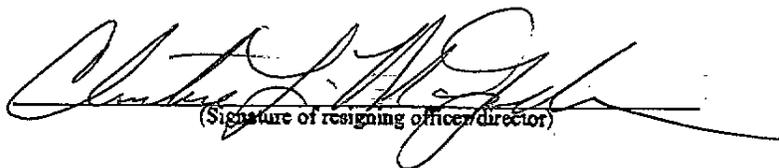
FILED

I, CHRISTINE L. McLAUGHLIN hereby resign as President  
(Title)

of MONTE PALO CORP  
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to: Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314**