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OD Resign C.COULLIETTE

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**EXAMINER** 

## **COVER LETTER**

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

TO:

**Amendment Section** 

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Osise	A. B	Barig		, hereby ı	esign as_	<u> </u>	, v	(Title)	. <u>-</u>	
of		111	Colors (Name of C	PAIN- Corporatio	ting,	INC	•				,
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