## 10000098310

(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:	

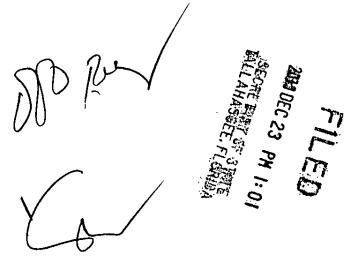
Office Use Only

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## **COVER LETTER**

Division of Corporations
SUBJECT: OTAK Group
(Name of Corporation)
DOCUMENT NUMBER: PARTIN 987 10
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
John H. Kato Jr
(Name of Person)
OTAK Group, Inc
(Name of Firm/Company)
96126 Mt Zion Loop
(Address)
Yulee, FL 32097
(City/State and Zip Code)
For further information concerning this matter, please call:
Donna G. Kato 904 813-1885
Donna G. Kato  (Name of Person)  at (904) 813-1885  (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

TO: Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, John H. Kato Jr	, hereby resign as_	Corporate Secretary	
*,	, nereby resign us_	(Title)	
of OTAK Group, Inc			
(Name of Cor	poration)	,	
(Document Number, if known), a c	orporation organized un	der the laws of the State of	
Florida			
1	7 -		
(Signature)	are of resigning officer/direct	tor) Afficient T	
(Signatu	te of resigning officer/uneco	23 F	

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314