

P000000108312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

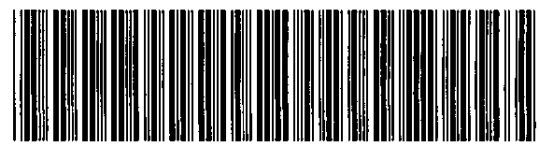
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000240903180

10/22/12--01042--005 **35.00

12 OCT 22 AM 10:57
Filing Office

OD / RES
(10) 10/23/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SNAKE OUT INC
(Name of Corporation)

DOCUMENT NUMBER: P00000108312

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DIKO ALEXANDER
(Name of Person)

(Name of Firm/Company)

1207 S 26 AVE
(Address)

HOLLYWOOD FL 33020
(City/State and Zip Code)

For further information concerning this matter, please call:

DIKO ALEXANDER at (868) 334-7400 (dikoalex@yahoo.com)
(Name of Person) (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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DIKO ALEXANDER, hereby resign as OFFICER (SD)
(Title)

of SNAKE OUT INC
(Name of Corporation)

P00000108312, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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

12 OCT 22 AM 10:57