P00000114141

| (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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TRANSMITTAL LETTER

MOMO'S NO. 1, INC. **SUBJECT:** (Name of Corporation) P00000114741 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARYBETH DEMONT, PRES. (Name of Person) MOMO'S NO. 1, INC. (Name of Firm/Company) 2400 MAHAN DR (Address) TALLAHASSEE, FL 32308 (City/State and Zip Code) For further information concerning this matter, please call: MARYBETH DEMONT (Name of Person)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. COMAN LEONARD | _, hereby resign as | AR | |
|---|--|--------------------------|----------|
| | _, , , | (Title) | _ |
| of MOMO'S NO. 1, INC. | | | _, |
| P0000114741 | | the laws of the State of | |
| (Signature of | resigning officer/director) | | |
| | CDD 10 625 00 | SECRETAR TALLAHASS | <u> </u> |
| FILING I Make checks payable to Florid | FEE IS \$35.00 a Department of Stat | TA R | ロフ |

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