

PO1000013410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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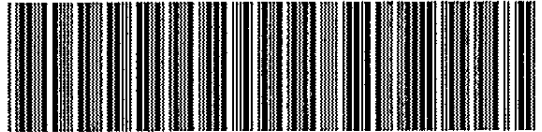
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

O/D Resign  
12/13/06  
DK

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: QUATRA GRAPHIC CORP.  
(Name of Corporation)

DOCUMENT NUMBER: P01000013410

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

Please return all correspondence concerning this matter to the following:

DONNE FONTANA DUANE JENSEN  
(Name of Person)

QUATRA GRAPHIC CORP.  
(Name of Firm/Company)

P.O. Box 151343  
(Address)

TAMPA FL 33684  
(City/State and Zip Code)

For further information concerning this matter, please call:

Duane Jensen at ( 727 ) 599-7441  
(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, Mary Tuohy Jensen, hereby resign as director  
(Title)

of Quatra Grafix, Corp.  
(Name of Corporation)

PO1000013410, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Mary Tuohy Jensen  
(Signature of resigning officer/director)

**FILED**  
06 DEC 11 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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