

PO1000016245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

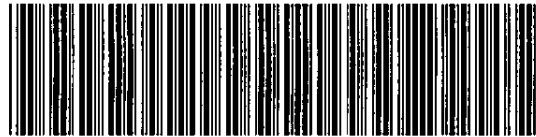
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700149074587

04/13/09--01021--011 \*\*35.00

FILED

09 APR 13 AM 9:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

017 Res  
4/17/09

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SYMMETREX, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P 01000016245

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

Please return all correspondence concerning this matter to the following:

TERENCE D. WALTER  
(Name of Person)

SYMMETREX, INC.  
(Name of Firm/Company)

850 TRAFALGAR COURT #100  
(Address)

MARIETTA FL 32751  
(City/State and Zip Code)

For further information concerning this matter, please call:

TERRY WALTER at (847) 644 7303  
(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, TERENCE WALTER, hereby resign as CHIEF EXECUTIVE OFFICER  
(Title)

of SYMMETRIX INC  
(Name of Corporation)

01000016245, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

FILED  
09 APR 13 AM 9:40  
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