

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



400150264594

04/16/09--01009--005 **35.00

FILED
2009 APR 16 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign.

TB 4-20-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SYMMETRIX INC
(Name of Corporation)

DOCUMENT NUMBER: P01000016245

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

Please return all correspondence concerning this matter to the following:

EDWARD EVANS
(Name of Person)

(Name of Firm/Company)

37 MADDOX ST. LEVEL 3
(Address)

LONDON W1S 2PP UK
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (_____) (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

FILED
2009 APR 16 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, EDWARD DANIEL PROBERT EVANS hereby resign as PRESIDENT
(Title)

of SYMMETREX, INC.
(Name of Corporation)

P010000/6245 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