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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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## **COVER LETTER**

Division of Corporations
SUBJECT: Love Malwon, Inc. tox il # 65-111759
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:
(Name of Person)
(Name of Firm/Company)
1140-25. W 1 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (56) 503 - 0176 (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, _	Jonathan D. Carre , hereby resign	as Paes	19c イ (Title)
of_	(Name of Corporation)	· × 10 #	65-1117599
		under the laws o	f the State of
	¥ lon100	•	do www
	(Signature of resigning officer/dia	rector)	O6 F
	FILING FEE IS \$35.00		FILED WII: 2

Amendment Section

Make checks payable to Florida Department of State and mail to:

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