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TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

(Name of Corporation) SUBJECT: DOCUMENT NUMBER: POLO0007743

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) 2RJ07S JLN 6 / ROMOTEN'S

4151 N. STATERP7 (Address) NOOD FLOPERA 33021 (City/State and Zip Code)

For further information concerning this matter, please call:

JESSEE ROBESON (Name of Pers at (<u>95V</u>) <u>985-1155</u> (Area Code & Daytime Telephone Number)

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

Street Address: Amendment Section **Division of Corporations** 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

••

1. CAR D. BEAN ____, hereby resign as VZC5 V REST ATU T WALLERS Box TAG **LOMOTIONS**, I Name of Colporation) (Document Number, if known) ___, a corporation organized under the laws of the State of ORZDA

(Signature & resigning officer/director)

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HASSEE FLORIDA

FILING FEE 1S \$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