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57 I L. E D 09 APR 24 AM II: 24 SECRETARY OF STATE TALLAHASSEE. FLORIDA



C.COULLIETTE APR 2 8 2009 EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

SAVE **SUBJECT:** (Name o **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) 54 (Address) 0

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 J (·)) (0

 (City/State and Zip Code)

For further information concerning this matter, please call:

3861626 (Area Code & Daytime Telephone Number) (Name of Person)

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

Beter Lothan I. hereby resign as_ of Name of Corporatio a corporation organized under the laws of the State of known) (Signature of resigning officer/director) 09 APR 24 IETARY OF STATE NHASSEE, FLORIDA STREETS erenar L AM 11: 24 ŧΥ 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

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