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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2009 JUN 29 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To: Division of Corporations

P.O. Box 6327

Tallahassee, FL

32314

From: Marion Franklin

4740 South Ocean Blvd.

*1115

Highland Beach, FL.

33487

Re: Marion Franklin's resignation from
OPTIMIZE Function.

Dear Person of Div. of Corp,

Please send receipt of this
request To: Marion Franklin
4740 South Ocean Blvd.
*1115
Highland Beach, FL
33487

as well as James Franklin.

Thank you,

Marion V. Franklin

561-704-7526

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Optimize Function, Inc
(Name of Corporation)

DOCUMENT NUMBER: 65-1159356

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

Please return all correspondence concerning this matter to the following:

James Franklin
(Name of Person)

RRS
(Name of Firm/Company)

621 NW 53rd St. Ste 250
(Address)

Boca Raton, FL 33487
(City/State and Zip Code)

For further information concerning this matter, please call:

James Franklin at (561) 893-0123
(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**

FILED

2009 JUL 29 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Marion Franklin, hereby resign as Treasurer
and any interest to the Co. (Title)
(MUF) as I surrendered all ownership of Optimize Function and should
have been removed as an officer June 1, 2006 with all shares
of Optimize Function, Inc turned over to James Franklin
(Name of Corporation)

EEIN 65-1159356 - PO/000110695, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

X Marion V. Franklin
(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