P01000111870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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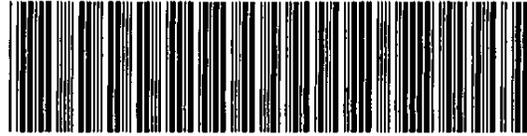
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts SEP 0 6 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ECOHIDE INTERNATIONAL, INC.
_____
(Name of Corporation)

DOCUMENT NUMBER: P01000111870
_____

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

Please return all correspondence concerning this matter to the following:

DI CIERI-CAMBON, PAUL
_____
(Name of Person)

_____
(Name of Firm/Company)

15127 NE 24TH STREET, PMB# 338
_____
(Address)

REDMOND, WA 98052
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

DI CIERI-CAMBON, PAUL   at (561) 602-6600
_____   _____
(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

CR2E044(08/05)

# OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, __DI CIERI-CAMBON, PAUL_____, hereby resign as__PRESIDENT_____

(Title)

of__ECOHIDE INTERNATIONAL, INC._____,

(Name of Corporation)

P01000111870
_____, a corporation organized under the laws of the State of

(Document Number, if known)

FLORIDA_____.
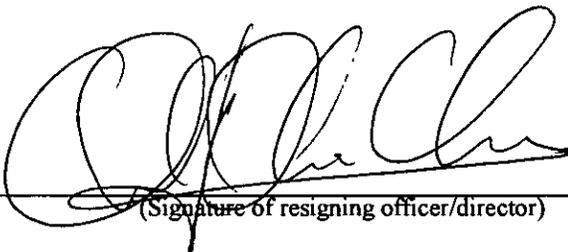
(Signature of resigning officer/director)

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