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EXAMINER

COVER LETTER

Amendment Section Division of Corporations TO:

SUBJECT:	MEET CORPORATION	
DOCUMENT NUMBER:	Corp.	oration)
		on and fee are submitted for filing
Please return all correspond	ence concerning this matter to	the following:
PRAMUKHA PATEL		
(Name	e of Person)	_
MEET CORPORATION		
(Name of	Firm/Company)	_
3535 SE MARICAMP RI	SUITE # 301	
(A	(ddress)	
OCALA, FL 34471		
(City/Stat	e and Zip Code)	-
For further information con-	cerning this matter, please call	;
PRAMUKHA PATEL	at (352	454 5752 ode & Daytime Telephone Number)
(Name of Per	son) (Area Co	ode & Daytime Telephone Number)

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

L WHALLAT BALET	, hereby resign as PRESIDENT/SECRETARY		
•		(Title)	
of MEET CORPORATION		·	
(Nary	ne of Corporation)	,	
(Document Number, if known)	a corporation organized under the law	ws of the State of	
FLORIDA	·		
	(Signature of resigning officer/director)	MONICA LYNN REID Notary Public, State of Florida My Comm. exp. Feb. 1, 2013 Comm. No. DD 853816	
		mariea Byn Rose	

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 IVISION OF CORPORATIONS

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