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SUBJECT: ZODECMA HOW! E (Name of Corporation) DOCUMENT NUMBER: PO 2 00000 / 6 / 9 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing Please return all correspondence concerning this matter to the following: ZODECMA HOW! E (Name of Person) TOTAL KNOCK OUT, MC (Name of Firm/Company) 777 E. ATLANTIC AVE C2/333 (Address) DELRAY DEACH, FL 33483 /(City/State and Zip Code) For further information concerning this matter, please call: ZODECMA HOW! E (Name of Person) (Name of Person)	TO: Amendment Section Division of Corporations
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing Please return all correspondence concerning this matter to the following: ZODELMA	SUBJECT: ZODECMA HOWIE (Name of Corporation)
Please return all correspondence concerning this matter to the following: 2006LMA HOWIE (Name of Person) TOTAL KNOCK OUT, MC (Name of Firm/Company) 777 E. ATLANTIC AVE C2/333 (Address) DELRAY BEACH, FL 33483 /(City/State and Zip Code) For further information concerning this matter, please call:	DOCUMENT NUMBER: PO 2 00000 1619
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For further information concerning this matter, please call:	TOTAL KNOCK OUT, NC. (Name of Firm/Company)
For further information concerning this matter, please call:	777 E. ATLANTIC AVE C2/333
For further information concerning this matter, please call:	DECRAY BEACH, FL 33483 (City/State and Zip Code)
ZooecnA Havie at (561) 450 8363 (Name of Person) at (561) 450 8363 (Area Code & Daytime Telephone Number)	
	Zooeun A Haul E at (561) 450 8363 (Name of Person) at (561) 450 8363 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ZODELMA HOWIE , hereby resign as VICE President
(Title)
of 10 TAL KNOCK OUT, INC. (Name of Corporation)
Po200001619, 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