Requester's Name Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy ☐ Photocopy ☐ Will wait Mail out Certificate of Status 000007201510--0 -08/19/02--01061--001 *****70.00 ******35.00 NEW FILINGS **AMENDMENTS** Profit Amendment ■ Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement

Trademark Other

CR2E031(7/97)

Examiner's Initials 131

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02 AUG 19 AM 9: 06

TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION

I, Bonnie Morse , hereby resign as President (Title)
of Orion Enterprises, Incorporated (Name of Corporation)
a corporation organized under the laws of the State of Florida
and affirm that the corporation has been notified in writing of the resignation.
Cornic Morse (Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
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