

PD200000 7275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

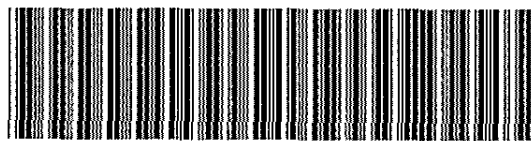
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

04/27/05--01046--003 **35.00

officer Resignation

T BROWN MAY - 4 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OLIFA DEVELOPMENT, INC
(Name of Corporation)

DOCUMENT NUMBER: P02000007275

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

MICHAEL W HELMS
(Name of Person)

(Name of Firm/Company)

653 SHORT OAR COURT
(Address)

SANFORD, FL 32771
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL W HELMS at (321) 303-4945
(Name of Person) (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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

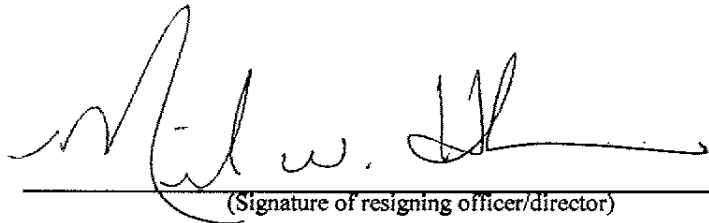
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MICHAEL W HELMS, hereby resign as VICE PRESIDENT
(Title)

of OLIFA DEVELOPMENT, INC.,
(Name of Corporation)

P02000007275, 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