

P020000091379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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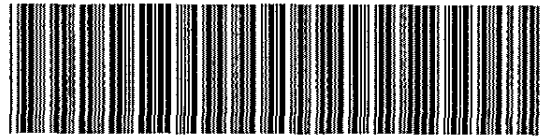
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DD/Res
@ 7.26.04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S & S SALES, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO200009139

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

Please return all correspondence concerning this matter to the following:

LINDA M. OHLIN
(Name of Person)

S & S SALES, INC.
(Name of Firm/Company)

99 GEORGE KING BLVD
(Address)

CAPE CANAVERAL, FL 32920
(City/State and Zip Code)

For further information concerning this matter, please call:

LINDA OHLIN at (321) 784-9000
(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

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04 JUL 19 PM 4:30
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LINDA OHLIN, hereby resign as SECRETARY
(Title)

of S & S SALES, INC.,
(Name of Corporation)

PO200009139, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)
LINDA M. OHLIN

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

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TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE