

P02000097058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

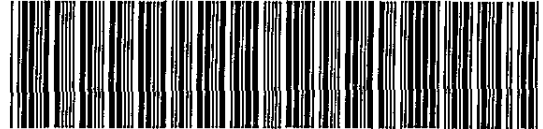
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

O/D Resignation  
Jm 7/10/03

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ENTERPRISES,  
KRISSEL ENTERPRISES, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P02000097058

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 KRISSEL  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

12350 S.W. 132<sup>ND</sup> CT #215  
(Address)

MIAMI, FL 33186  
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL KRISSEL at (305) 254-8867  
(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

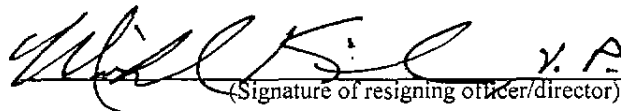
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, MICHAEL KRISSEL, hereby resign as VICE PRESIDENT  
(Title)

of KRISSEL ENTERPRISES, INC.  
(Name of Corporation)

P02000097058, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

 V.P.  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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