

PO2000128661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

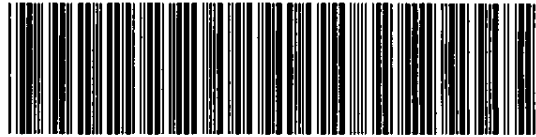
(Business Entity Name)

(Document Number)

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12/21/07--01016--009 \*\*35.00

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07 DEC 21 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Officer Rishin  
Cris Murphy  
12/26/07

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Total Sapes, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P02000128661  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Mark Gonzales  
\_\_\_\_\_  
(Name of Person)

Total Sapes, Inc  
\_\_\_\_\_  
(Name of Firm/Company)

P.O. Box 38  
\_\_\_\_\_  
(Address)

Land O Lakes, FL 34639  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Gonzales  
\_\_\_\_\_ at ( 813 ) 363-4916  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

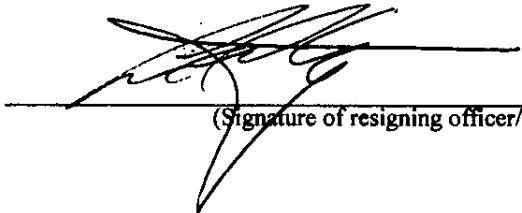
**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Conrad Canty, hereby resign as ~~Secretary~~ PST  
(Title)

of Total Scares, Inc.  
(Name of Corporation)

P02000128661, 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

**FILED**  
**07 DEC 21 PM 12:04**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA