

PO2000/345/4

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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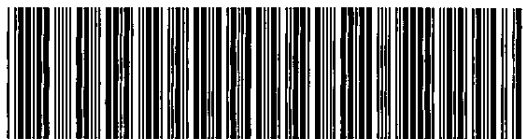
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dixieland 4X4, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P 02 000134514

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

Please return all correspondence concerning this matter to the following:

Rae Michelle Johnson
(Name of Person)

Dixieland 4X4, Inc.
(Name of Firm/Company)

690 Virecent Drive
(Address)

Cantonment, FL 32533
(City/State and Zip Code)

For further information concerning this matter, please call:

Bradley Brumley at (321) 284 8235
(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, RAE M. JOHNSON, hereby resign as CFD
(Title)

of Dixieland 4x4, Inc.
(Name of Corporation)

P02000134514, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Rae M. Joh
(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