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(Requ	estor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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12/16/03 DID pes.

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: South Sailes (leaners Inc.
DOCUMENT NUMBER: PO 300000 6330
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jacob Fundiller (Name of Person)
(Name of Firm/Company)
8601 Bonita Isle Dr. (Address)
La Ke Worth F1, 33467 (City/State and Zip Code)
For further information concerning this matter, please call:
Jacob Fundiller at (561) 966-0170 (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

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

03 DEC -8 PM 12: 32 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Jacob	Fundiller	, her	eby resign as_	Presi.	dent
					(тие)
South	Sails Cla	eaners	lac.		
	(Name of	Corporation)		,	
) 0 3 0 0 0 0 (Document N	umber, if known)	, a corporation	organized un	der the laws o	of the State of
Florida		•			7
	Dach	Frie	delle		
	Jacob	mature of resign	ing officer/direct	or)	

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