## 0300027220

| (Requestor's Name)                      |
|-----------------------------------------|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|                                         |
|                                         |
| •                                       |

Office Use Only



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07/20/07--01002--016 \*\*35.00

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| SUBJECT:                                                                                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (Name of Corporation) P0300027220  DOCUMENT NUMBER:                                                                                                                                                                                                        |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing                                                                                                                                                               |
| Please return all correspondence concerning this matter to the following:                                                                                                                                                                                  |
| Marisela Azuara                                                                                                                                                                                                                                            |
| (Name of Person)                                                                                                                                                                                                                                           |
| INJ, Inc.                                                                                                                                                                                                                                                  |
| (Name of Firm/Company)                                                                                                                                                                                                                                     |
| 6319 Sweetwater Dr.                                                                                                                                                                                                                                        |
| (Address)                                                                                                                                                                                                                                                  |
| Lakeland, FL 33811                                                                                                                                                                                                                                         |
| (City/State and Zip Code)                                                                                                                                                                                                                                  |
| For further information concerning this matter, please call:                                                                                                                                                                                               |
| Marisela Azuara 863 646-1609                                                                                                                                                                                                                               |
| Marisela Azuara  (Name of Person)  at (  (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 Clifton Building Clifton Executive Center Circle Tallahassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 |

CR2E044/08/05)

## **OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION**



| Eusebio Azuara<br>I,                     | President , hereby resign as                             |
|------------------------------------------|----------------------------------------------------------|
| 49                                       | (Title)                                                  |
| INJ, INC.                                |                                                          |
| (Nar                                     | ne of Corporation)                                       |
| P03000027220 (Document Number, if known) | , a corporation organized under the laws of the State of |
| Florida                                  | ·                                                        |
|                                          |                                                          |
|                                          |                                                          |
|                                          | Esso tero 10                                             |
|                                          | (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