

P03000028569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

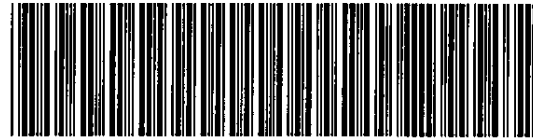
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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACTION ADVENTURES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P03000028569

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

Please return all correspondence concerning this matter to the following:

RHONDA A. LAFLEUR
(Name of Person)

(Name of Firm/Company)

5 BAY RIDGE ROAD
(Address)

Key Largo, FL 33037
(City/State and Zip Code)

For further information concerning this matter, please call:

RHONDA A LAFLEUR at (305) 498-7179
(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, RHONDA A. LAFLEUR, hereby resign as PRESIDENT / SECRETARY
(Title)
of ACTION ADVENTURES, INC.
(Name of Corporation)
PO 3000028569, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

Rhonda A. LaFleur
(Signature of resigning officer/director)

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
01 JAN 24 PM 3:43

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