

PD3000040829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

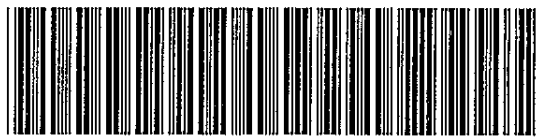
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resignation

T BROWN APR 24 2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DDDLmm Inc
(Name of Corporation)

DOCUMENT NUMBER: P030000 40829

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

Please return all correspondence concerning this matter to the following:

Debra Schluensen
(Name of Person)

(Name of Firm/Company)

7820 Treasure Pointe Dr
(Address)

Port Richey FL 34668
(City/State and Zip Code)

For further information concerning this matter, please call:

Debra Schluensen at 727 817-1419
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
03 APR 21 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Debra Schluensen, hereby resign as President
(Title)

of DDDLmm, Inc.
(Name of Corporation)

PD3000040829 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