## P03000046877

| (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: |
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|   |
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Office Use Only



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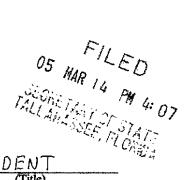
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## TRANSMITTAL LETTER

|  | vision of Corporations  |
|--|---|
|  | r: MIAMI BICYCLE COMPANY (Name of Corporation)  |
| DOCUMI                                     | ENT NUMBER: 6030000 46877   |
| The enclos                                 | sed Officer/Director Resignation for a Corporation and fee are submitted for filing   |
| Please retu                                | ırn all correspondence concerning this matter to the following:   |
| PHILL                                      | (Name of Person)  |
|  | (Name of Firm/Company)  |
| 4517                                       | S.U. 35 <sup>414</sup> AVE (Address)  |
| FORTL                                      | AUDER DALE, FL 33017<br>(City/State and Zip Code)   |
| For further                                | r information concerning this matter, please call:  |
| PHILLIA                                    | (Name of Person) at (786) 256-3701<br>(Name of Person) (Area Code & Daytime Telephone Number)   |
| Enclosed i                                 | s a check for \$35.00 made payable to the Florida Department of State.  |
| Mailing A Amendment Division of P.O. Box 6 | ddress:  and Section  Amendment Section  f Corporations  5327  FIG. 32314  Street Address:  Amendment Section  Division of Corporations  409 E. Gaines Street  Tallabasses FI 32300 |

## OFFICER'/ DIRECTOR RESIGNATION FOR A CORPORATION



| I, PHILLIP B. MILLER                         | , hereby resign as_           | PRESIDENT<br>(Title)        |   |
|--|-------------------------------|-----------------------------|---|
| of MIAITI BICTCLE (Name                      | COTPANY of Corporation)       |                             |   |
| PO30000 46877<br>(Document Number, if known) | , a corporation organized und | der the laws of the State o | f |
| FLORIDA                                      | <del>_</del> ·                |                             |   |
|  |                               |                             |   |

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314