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DID Resign. 9/25/1 X.

TRANSMITTAL LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: Corporation' 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:

(Name of Firm/Company)

City/State and Zip Code XO

For further information concerning this matter, please call:

at (_X13 (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 T. Bahassee, FL 32314

Street Address:

Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

+Ι, hereby resign as_ (Title) 0 Corporation ame of \geq , a corporation organized under the laws of the State of (Document Number, if known) (Signature of resigning officer/director) చు σ FILING FEE IS \$35.00 PM k 35 C3 Make checks payable to Florida Department of State and mail to Amendment Section **Division of Corporations**

P.O. Box 6327 Tallahassee, Florida 32314