

P03000055197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

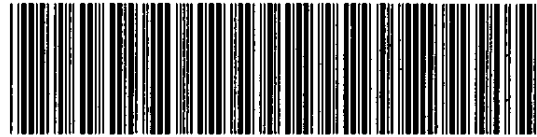
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 AUG 11 PM 4:29

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T. Burch AUG 12 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MKcompo incorporated
(Name of Corporation)

DOCUMENT NUMBER: P03000055197

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

Please return all correspondence concerning this matter to the following:

Mark Compo
(Name of Person)

MKcompo incorporated
(Name of Firm/Company)

3824 SE 56 ST
(Address)

Ocala FL 34480
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Compo at (352) 208-6006
(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, Kari H. Compo, hereby resign as V.p.
(Title)

of MK Compo Incorporated
(Name of Corporation)

P03000055197, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Kari H. Compo
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 AUG 11 PM 4: 29

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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