D03000077683

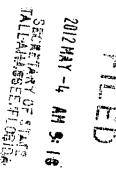
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

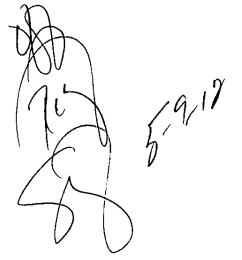
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

Date of the stage

SUBJECT: Jofly Inc	
-	(Name of Corporation)
DOCUMENT NUMBER: P030	000072683
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	ncerning this matter to the following:
Josef Ralf Strauss	
(Name of Pers	con)
Jofly Inc	
(Name of Firm/Co	ompany)
1229 Plumosa Dr	
(Address)	
Fort Myers, FL 33901	
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
Josef R. Strauss	at (238) 321-6060
(Name of Person)	at (238) 321-6060 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mad	e payable to the Florida Department of State.
Street Address: Amendment Section	Mailing Address: Amendment Section
Division of Corporations Clifton Building	Division of Corporations Post Office Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Josef Ralf Strauss	, hereby resign as President
*,	(Title)
of Jofly Inc	
(Name of Cor	poration)
P03000072638 , a c	orporation organized under the laws of the State of
Signatu	are of regigning 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