

P030000081016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

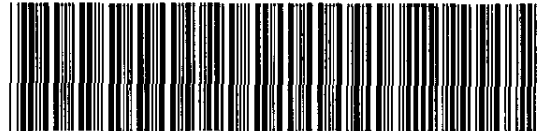
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARIDINE, INC

(Name of Corporation)

DOCUMENT NUMBER: P03000081016

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

ROBERT T FORBESS

(Name of Person)

ARIDINE, INC

(Name of Firm/Company)

2739 VIACAPRI 1020

(Address)

CLEARWATER, FL 33764

(City/State and Zip Code)

For further information concerning this matter, please call:

KEVIN MAKAR _____ at (813) 862-0349 EXT 11
(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, ROBERT T FORBESS, hereby resign as TREASURER
(Title)

of ARIDINE, INC
(Name of Corporation)

P03000081016, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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