## P03000084853

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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SECRETARY OF STATE

Officer Resignation

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## TRANSMITTAL LETTER

	ment Section n of Corporations
SUBJECT:	LOUISE'S PET CONNECTION INC. (Name of Corporation)
DOCUMENT	NUMBER: P0300084853
The enclosed O	Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return al	Il correspondence concerning this matter to the following:
_ Step	(Name of Person)
Louises	PET CONNECTION INC. (Name of Firm/Company)
3005 W	(Address)
LAKE MAK	Y FL. 32746 7 (City/State and Zip Code)
For further info	rmation concerning this matter, please call:
PATTI DI	(Name of Person) at (407) 688 · 1026 (Area Code & Daytime Telephone Number)
Enclosed is a cl	heck for \$35.00 made payable to the Florida Department of State.
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	porations Division of Corporations 409 E. Gaines Street

CR2E044(11/02)

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION ALCAPIAN 9:47 I, Stephane Move , hereby resign as DIRECTOR OFFICER (Title) of Louise's Pet Commental INC. (Name of Corporation) PO300084853 , a corporation organized under the laws of the State of (Document Number, if known) FLOKIOA

(Signature of resigning 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