

P03000088886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

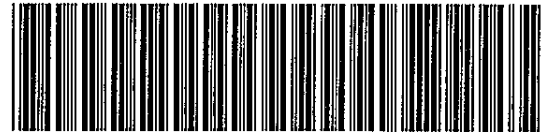
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600055512826

06/08/05--01013--014 **35.00

FILED
05 JUN -8 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00

Smith

JUN 09 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A. Blind Attraction
(Name of 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:

Saira O'Farrill
(Name of Person)

(Name of Firm/Company)

1400 Laguna Lane
(Address)

Pembroke Pines, FL, 33026.
(City/State and Zip Code)

For further information concerning this matter, please call:

Saira O'Farrill at (754) 246-2468
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

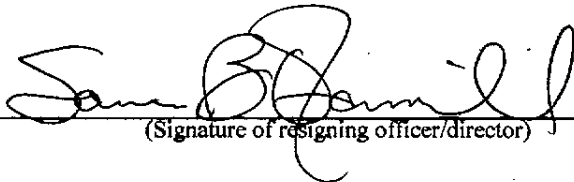
Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Saira B. O'Farrill, hereby resign as Sec/Treasurer
(Title)
of A Blind Attraction, Inc.
(Name of Corporation)

_____, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(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

FILED
05 JUN -8 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA