

PD3000091398

(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

DD/Res  
(1a) 9.20.05



500059012155

09/13/05--01018--008 \*\*35.00

FILED  
05 SEP 13 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SURVIVAL ENTERPRISES, INC  
(Name of Corporation)

DOCUMENT NUMBER: P03000091398

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

Please return all correspondence concerning this matter to the following:

Michael M. Watts  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

210 Providence Square  
(Address)

Greenville, SC 29615  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael M. Watts at (864) 270-7392  
(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, Michael Watts, hereby resign as Director  
(Title)

of SURVIVAL ENTERPRISES, INC.  
(Name of Corporation)

P03000091398, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Michael Watts  
(Signature of resigning officer/director)

FILED  
05 SEP 13 AM 10:00  
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