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COVER LETTER

TO: Amendment Section Division of Corporations

I

SUBJECT: Corporation) ame of 96 **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:

Name of Person (Name of Firm/Company (Address) (City/State and Zip Code)

For further information concerning this matter, please call:

elephone Number) (Name of Person) гея Code & Davtime

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

hereby resign as Title ame of Corporation) ... a corporation organized under the laws of the State of Document Number, if known ÷. 08 MAR œ YOF AM 11: 3 Π Signature of resigning officer/director) STAT Ū

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