## P04000013334

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/Otate/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified CopiesCertificates of Status
Special Instructions to Filing Officer:





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11774/14 111145 4104 \*\*118,75



12-Gjar

## TRANSMITTAL LETTER

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

TO:

Amendment Section Division of Corporations

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Judid Wooves hereby resign as PRESIDENT (Title)	
of Josa letess Inc. For F. T. (Name of Corporation)	
Po 40000/3334  (Document Number, if known)  a corporation organized under the laws of the State of P	
Florida Propins 2	
Signature of resigning office//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