P04000015415

(Re	equestor's Name)	*
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	·#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





900039799619

08/05/04--01011--009 **35.00



Of Resign Apr 8/4/04

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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Gay Steonson, hereby resign as Office (Title)	_
Diamod Ladgusture, Inc.	,
, à 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