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Officer Resignation W

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: IN THE BUSINESS OF MAKING FACES, IN (Name of Corporation) DOCUMENT NUMBER: POYOGODD 22 1-1-
DOCUMENT NUMBER: TO 4000028266
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
B, Il'iE Jo SKRIPKO (Name of Person)
(Name of Firm/Company)
(Name of Firm/Company)
69 PLANTATION BLUD (Address)
LAKE WORTH FL 33467 (City/State and Zip Code)
For further information concerning this matter, please call:
BARBARA RUTICLIA NOL (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

2005 JUN 20 PM 2: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, BILLE JO SKRIPKO, hereby resign as TREASURER (Title)

of THE BUSINESS OF MAKING FACES, Inc.
(Name of Corporation)

PO 40000 28 26 6, a corporation organized under the laws of the State of (Document Number, if known)

FLORIDA

Billy of Shripko 6-17-05

(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