

... PD4000031729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

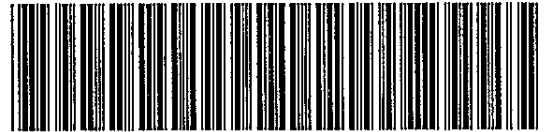
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*Off Resign  
T. Lewis*

09/23/05--01034--025 \*\*35.00

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05 SEP 23 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** S&S ATLANTIC, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** 904000031729

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

Please return all correspondence concerning this matter to the following:

MAGIE MATHEW  
(Name of Person)

S&S ATLANTIC, INC  
(Name of Firm/Company)

7832 Amber Ct.  
(Address)

Seminole, FL 33772  
(City/State and Zip Code)

For further information concerning this matter, please call:

OSAMA SKAYALI CPA PA at (813) 899-9642  
(Name of Person) (Area Code & Daytime Telephone Number)

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**

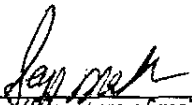
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05 SEP 23 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, SASI MATHEW, hereby resign as Officed/Director  
(Title)

of S&S ATLANTIC, INC.  
(Name of Corporation)

P04000031729, a 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