

PO4000045291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

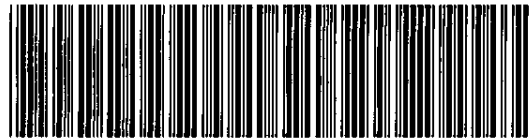
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

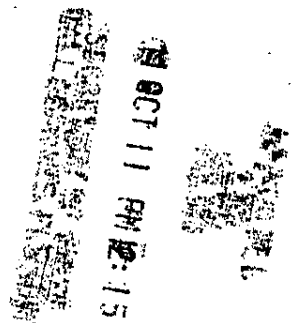
Special Instructions to Filing Officer:

Office Use Only



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10/11/11  
TL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** On Display, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000045291

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

Please return all correspondence concerning this matter to the following:

Leonardo Esquivel  
(Name of Person)

On Display, Inc.  
(Name of Firm/Company)

7825 WEST 2ND COURT 3  
(Address)

HIALEAH FL 33014  
(City/State and Zip Code)

For further information concerning this matter, please call:

Leonardo Esquivel at ( 305 ) 799-5823  
(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

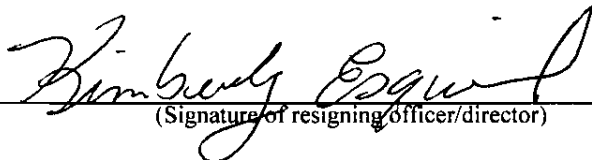
**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

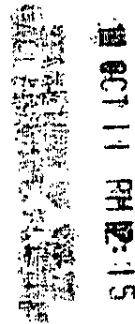
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Kimberly Esquivel, hereby resign as Vice President  
(Title)

of Ondisplay, Inc.  
(Name of Corporation)

P04000045291, 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