

P04000065361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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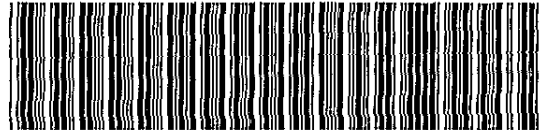
(Business Entity Name)

(Document Number)

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04/08/05--01012--012 \*\*35.00

2005 APR - 8 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Officers Resignation  
LFS  
4-15-05

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MMIZ ENTERPRISE, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000065361

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

Please return all correspondence concerning this matter to the following:

YING L HER  
(Name of Person)

(Name of Firm/Company)  
~~12219~~ 12219 Woodduck PL.  
(Address)

TAMPA, FL 33617  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sasha Lor at 770-875-7327  
(Name of Person) (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

FILED

OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION

2005 APR -8 AM 9:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, YING L HER, hereby resign as Officer/Director  
(Title)

of MMIZ ENTERPRISE, INC.  
(Name of Corporation)

P04000065361, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Ying L Her 4/5/05  
(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