

P04000081407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

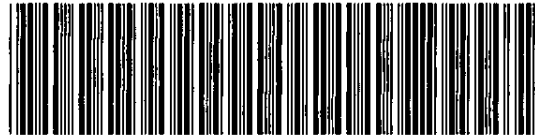
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TALLAHASSEE, FLORIDA

T. Roberts MAY 01 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kasen & Levine, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P04000081407

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

Please return all correspondence concerning this matter to the following:

Scott A. Levine, Esq.

(Name of Person)

Kasen & Levine, P.A.

(Name of Firm/Company)

15 Southwest 10th Street

(Address)

Fort Lauderdale, Florida 33315

(City/State and Zip Code)

For further information concerning this matter, please call:

Scott A. Levine

(Name of Person)

at (954) 764-1599

(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

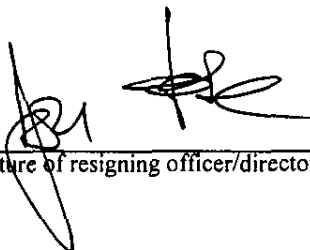
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Jonathan B. Kasen, hereby resign as President
(Title)

of Kasen & Levine, P.A.
(Name of Corporation)

P04000081407, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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08 APR 28 PM 1:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

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