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(Re	equestor's Name	<u></u>
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(Ac	dress)	
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(Ci	ty/State/Zip/Phor	20 ff)
(CI	ty/State/Zip/P1101	ie #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Na	me)
-		, , , , , , , , , , , , , , , , , , ,
(Do	ocument Number) .
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer	·
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SECRETARY OF STATE TALLAHASSEE, FLORIDA 12: 22

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COVER LETTER

Divisio	on of Corpo	orations			
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	1/14	Parel	STUDIO.	The	
SUBJECT:_	ME	1 AKIY	J' OUID,	MO	

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

Please return all correspondence concerning this matter to the following:

MAKIN ALMAN
(Name of Person)

ALMAN ACCOUNTING + TAX SERUCE
(Name of Firm/Company)

172 90 NE 19th Ax

(Address)

NORTH MAMI BEACHER 33162

For further information concerning this matter, please call:

MARTIN ALMAN at (305) 944-5353
(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

Amendment Section

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Toyce WOHL	, hereby resign as	ARECTOR + SECRET.	#Ky
of THE PARTY		(Title)	7
·	e of Corporation), a corporation organized un	der the laws of the State of	***************************************
FLORIDA	·		

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314