## P04000092437

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	*****
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500061331985

11714/05 -01011--074 \*\*35.00

OS NOV IL AMII: 58

ex 15-1+

## **COVER LETTER**

	endment Section sion of Corporations
SUBJECT:	Golden Mountain Imports, Inc (Name of Corporation)
DOCUME	NT NUMBER: <u>P0400009 2437.</u>
The enclose	d Officer/Director Resignation for a Corporation and fee are submitted for filing
Please retur	n all correspondence concerning this matter to the following:
X	(Name of Person)
<u>G</u>	Olden Mautain ImPorts, In( (Name of Firm/Company)
2249 Bu	(Address)
Orlando	(City/State and Zip Code)
For further i	nformation concerning this matter, please call:
XiCON	(Name of Person) at (407 ) 852-5758 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is	a check for \$35.00 made payable to the Florida Department of State.
Street Addr Amendment Division of C Clifton Build 2661 Execut Tallahassee,	Corporations Division of Corporations ling Post Office Box 6327 ive Center Circle Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, XIGOLIUXI LIV.	, hereby resign as	s Board of	- Director (Title)	_
of Golden Mountain Ir	MPOCKS I INC.			<sup>5</sup>
P0400092437 (Document Number, if known)	a corporation organized u	mder the laws of	the State of	
Florida			05 NOV 14 1	Π
				T
- cio al lat	0 / N. I		AM II: 58 E. FLORID.	D
* XiauHV	(Signature of resigning officer/dire	ector)	_ >	

## 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