P04000097570

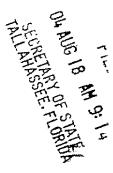
نس
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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TRANSMITTAL LETTER

SUBJECT: Cantenness. Sending Corporation

DOCUMENT NUMBER: PO400097540

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

Please return all correspondence concerning this matter to the following:

PLAD HOLLIN
(Name of Person)

COPP

(Name of Firm/Company)

A771 EXECUTIVE PAIK ORITE SAUTE 1

(Address)

City/State and Zip Code)

For further information concerning this matter, please call:

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

Amendment Section Division of Corporations

TO:

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

04 AUG 18 AM 9: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Jaho Hoghor	, hereby resign as (Title)
of Centermical Lenden, Name P0400097570	of Corporation) _ a corporation organized under the laws of the State of
(Document Number, if known)	

ignature 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