

PO4 000109497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/15/16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **DUVEKOT CORPORATION**

(Name of Corporation)

DOCUMENT NUMBER: **P04000109497**

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

Please return all correspondence concerning this matter to the following:

RENE C DUVEKOT

(Name of Person)

(Name of Firm/Company)

1451 West Cypress Creek Road - Suite 300

(Address)

Fort Lauderdale, FL 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

Rene C. Duvekot

(Name of Person)

at (**954**) **6460122**

(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
2661 Executive Center Circle
Tallahassee, FL 32301

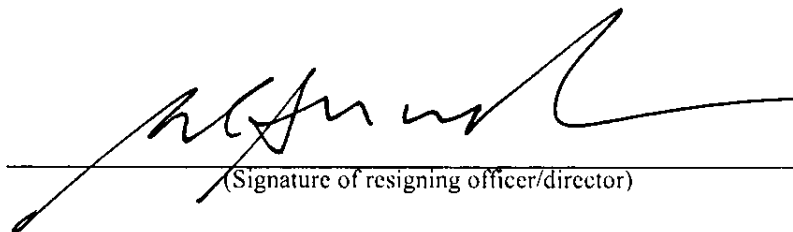
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Rene C. Duvekot, hereby resign as Director
(Title)

of Duvekot Corporation
(Name of Corporation)

P04000109497, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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TALLAHASSEE
FLORIDA
DEPARTMENT OF STATE

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