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DIVISION OF CORPORATIONS
2005 FE8 -9 PM 2: 55

(Requestor's Name)	_
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
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(Document Number)	_
Certified Copies Certificates of Status	-
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LECOIN TROP,°CAC (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SUZETTE M. AUXICA (Name of Person)
LECOIN MOPICAL DBA BIESSING BAKERY (Name of Firm/Company)
723 N. PINEHILL 3Rd (Address)
ORLANDO F1. 32808 (City/State and Zip Code)
For further information concerning this matter, please call:
SUZETTE M. AUXILA at (407) 294-2777 (Name of Person) (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
409 E. Gaines Street
Tallahassee, FL 32399

DIVISION OF CORPORATIONS

2005 FEB -9 PM 2: 55

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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