## P05000000213

(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:		

OD/Res Ma, 10.13.05



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10/04/05--01042--008 \*\*35.00



## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SIRIUS VENTURES, INC. (Name of Corporation)
DOCUMENT NUMBER: POSOU 0000 213
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Name of Person)
(Name of Firm/Company)
23) N. LOUNTRY LLUB PRIVE (Address)
ATLANTS, FL 33467 (City/State and Zip Code)
For further information concerning this matter, please call:
TOHN H. NIBBE at (954) 474-148 I (Name of Person) at (954) 474-148 I (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	JOHN NIBBE	, hereby resign as VP AND TREASURER (Title)
of_	SIRIUS VENTURES	/NC ne of Corporation)
	Posooooozi3 (Document Number, if known)	, a corporation organized under the laws of the State of
-,	FLORIDA	·

(Signature of resigning officer/director)

05 OCT -4 AMIO: ( Secure Lary of STA)

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