

PO 5000612908

(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:

Office Use Only



700134401627

08/18/08--01016--009 \*\*35.00

FILED  
2008 AUG 18 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signatures]*

8000612908

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bob Brown INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000012908

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

Please return all correspondence concerning this matter to the following:

Katrina Haug Brown  
(Name of Person)

Bob Brown Inc.  
(Name of Firm/Company)

1000 NW 8th Street  
(Address)

Poca Katon, FL 33486  
(City/State and Zip Code)

For further information concerning this matter, please call:

Katrina Haug Brown at (561) 558-5709  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

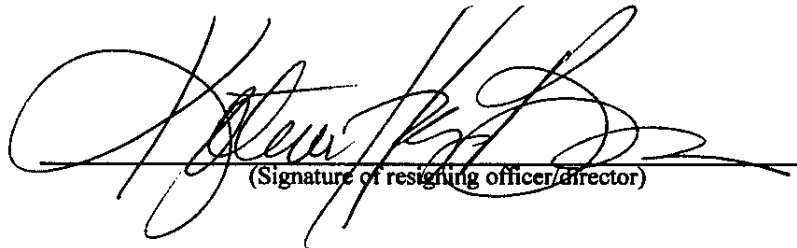
**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Katrina Haug Brown, hereby resign as Treasurer  
(Title)

of Bob Brown Inc.  
(Name of Corporation)

P05000012908, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(Signature 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

**FILED**  
2008 AUG 18 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA