

POS000009000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

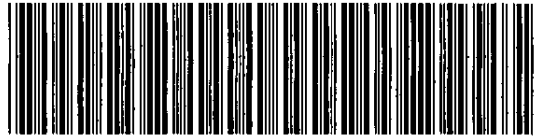
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off Par
Sy
10-13-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: POLAMER INC
(Name of Corporation)

DOCUMENT NUMBER: PO5000029002

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

Please return all correspondence concerning this matter to the following:

AGNIESZKA S. BORKOWSKI
(Name of Person)

POLAMER INC
(Name of Firm/Company)

3655 BROOKLYN LN
(Address)

LAKE WORTH, FL 33461
(City/State and Zip Code)

For further information concerning this matter, please call:

A. Borkowski at (561) 432-9797
(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, AGNIESZKA S. BORKOWSKI, hereby resign as VICE - PRESIDENT
(Title)

of POLAMER INC
(Name of Corporation)

P05000029002, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

ABorkowski

(Signature of resigning officer/director)

2009 OCT -6 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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