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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: The Florida Dive Show, Inc. (Name of Corporation)
DOCUMENT NUMBER: 00 5 0000 39 228
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Brad Notan (Name of Person)
The Florida Dive Show Inc. (Name of Firm/Company)
P.D. BOX 14808 (Address)
NPAM Black 7 33408 (City/State and Zip Code)
For further information concerning this matter, please call:
Prad Ndan at (888) 55 Stuba (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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Robert L. Johnson, hereby resign as V Pred	Biden itle)	<u>£</u>	-
of the Florida Dive Show, Inc.		<b></b> ,	
(Document Number, if known)  (Document Number, if known)  (Document Number, if known)	: State of		
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(Signature of resigning officer/director)	STATE LORID	94 :II MA	U

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