

PO5000046905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

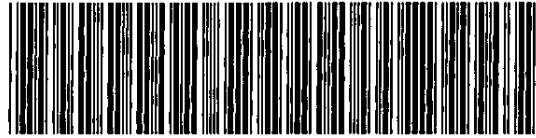
(Business Entity Name)

(Document Number)

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Resignation
of
Officer

03/20/07--01022--022 **35.00

FILED
2007 MAR 20 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARL
3/23/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGNATION OF DIRECTOR

(Name of Corporation)

DOCUMENT NUMBER: P05000046905

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

Please return all correspondence concerning this matter to the following:

DHARMA C. DEONARAIN

(Name of Person)

SND MANAGEMENT CORPORATION

(Name of Firm/Company)

1701 MARUMBI COURT

(Address)

WESLEY CHAPEL, FL 33543

(City/State and Zip Code)

For further information concerning this matter, please call:

DHARMA C. DEONARAIN

(Name of Person)

at (813) 298-3573

(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**

FILED

2007 MAR 20 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DIYAL C. DEONARAIN, hereby resign as DIRECTOR
(Title)

of S N D MANAGEMENT CORPORATION,
(Name of Corporation)

P05000046905, 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