## P05000053761

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
- Certificates of Status
Special Instructions to Filing Officer:

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ALLAHASSEE, FLORID.

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: TSLAND FISHING ADVENTURES (Name of Corporation)
<b>DOCUMENT NUMBER:</b> 605045900363
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
VSABEL C. LARKIN (Name of Person)
(Name of Person)
(Name of Firm/Company)
8651 SW 123 ST. (Address)
MIAMI, FL 33156 (City/State and Zip Code)
For further information concerning this matter, please call:
SABEL C. LARKIN at (305) 788-5765 (Name of Person) (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
Post Office Box 6327
Tallahassee, FL 32314

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, VSABEL (. LARKIN, hereby resign as VICE P	RESIDENT
of ISLAND FISHING ADVINTURES (Name of Corporation)	5,
G 05045900363a corporation organized under the laws of the (Document Number, if known)	e State of
FLORIDA .	
	<b>06 .</b>
Signature of resigning officer/director)	JAN 20 PI AHASSEE,
	PH E: 4

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