

PO5 0000 68980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

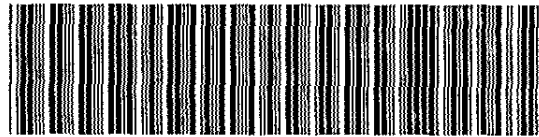
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D Resign.

10/2/07

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sign Distributors.com, Inc
(Name of Corporation)

DOCUMENT NUMBER: PD5000068980

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

Please return all correspondence concerning this matter to the following:

Laura Willem's
(Name of Person)

Sign Distributors.com, Inc
(Name of Firm/Company)

162 SW Spencer Ct Ste. 208
(Address)

Lake City FL 32024
(City/State and Zip Code)

For further information concerning this matter, please call:

Laura Willem's at (386) 623-0614
(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, Roger Leavitt, hereby resign as Treasurer
(Title)
of Sign Distributors.com, Inc.
(Name of Corporation)
P05000068980, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

Roger Leavitt

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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