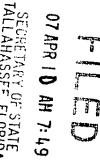


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(Requestor's Name)	
(Address)	500096219
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(Document Number)	
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3 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Edge Word Flowers IN (Name of Corporation DOCUMENT NUMBER: P0500069263	C))
The enclosed Officer/Director Resignation for a Corporation and	I fee are submitted for filing.
Please return all correspondence concerning this matter to the fo Gabriel Obando (Name of Person) Edge Wood Flowers Iwa (Name of Firm/Company) 4927 S. Wange Aue (Address)	llowing: Please send me the answer to my home Gabriel A. Obando 120 Jersewoods Ct Orlando FL 32824
City/State and Zip Code) For further information concerning this matter, please call:	Thank you.
Gabriel Dbando at (407) (Area Code & I	
Enclosed is a check for \$35.00 made payable to the Florida Depa	artment of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>Dabriel Obando</u> , hereby resign as <u>President</u> (Title)	
of Edge wood flowers INC (Name of Corporation)	
(Document Number, if known) 1 hos A	
OT A SEE	1 :
(Signature of resigning officer/director) (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