

P05000097131

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(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SCONNIE, INC.
(Name of Corporation)

DOCUMENT NUMBER: POS000097131

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

Please return all correspondence concerning this matter to the following:

Ilean M Sanders
(Name of Person)

(Name of Firm/Company)

450 E. Key Lime Sq SW
(Address)

VERO Beach, FL 32968
(City/State and Zip Code)

For further information concerning this matter, please call:

Ilean M Sanders at (772) 770-6459
(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
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, Michael A Reed, hereby resign as Treasurer
(Title)

of SCONNIE, INC
(Name of Corporation)

POS000097131, a corporation organized under the laws of the State of
(Document Number, if known)

Michael A Reed
(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA