

POS 000105795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800081054808

10/23/08--01043--007 **35.00

FILED
06 OCT 23 PM 12:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OMOMEGA INC.
(Name of Corporation)

DOCUMENT NUMBER: POS000105795

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

Please return all correspondence concerning this matter to the following:

Bunny Patel
(Name of Person)

OMOMEGA INC.
(Name of Firm/Company)

9840 PEDDLERS WAY
(Address)

ORLANDO FL 32817
(City/State and Zip Code)

For further information concerning this matter, please call:

Bunny Patel at (407) 679-6892
(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, BHUVANESHWART. PATEL hereby resign as DV PT
(Title)

of OMOMEGA INC.
(Name of Corporation)

P05000105795, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

B. S. Patel
(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

FILED
06 OCT 23 PM 12:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA