

P05000108869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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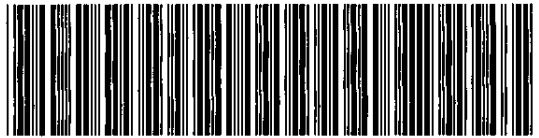
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE


AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF FLORIDA
COUNTY OF DUVAL

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TALLAHASSEE, FLORIDA

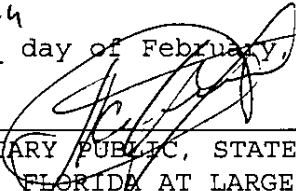
I, JUSTEN HOVEY, after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

I, JUSTEN HOVEY, hereby resign as President and Director of OCALA TATTOO, INC., a Florida corporation. That the corporation has been notified in writing of the resignation.


Justen Hovey

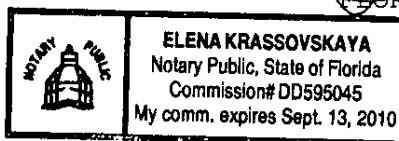
 personally known or
✓ produced the following identification: FL Drive License

Sworn to and subscribed before me, this 26th day of February, 2008.



NOTARY PUBLIC, STATE OF
FLORIDA AT LARGE

My commission expires:



FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314