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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

SUBJECT: CLUB Deco /NC (Name of Corporation)
DOCUMENT NUMBER: PO 5000 1/8/35
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)  Club Decolve  (Name of Firm/Company)
19999 Collins Aut #46 (Address)
Bal Hwhov FL 33154 (City/State and Zip Code)
For further information concerning this matter, please call:  (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, ERIC	u Neam	<b>(</b> Ann_, her	eby resign as	Title	D Chirech	<b>/</b>
of Cla	b Dece	o /NC.	•			
Post (Documen	1/8/ 11 Number, if known)	3, a corporation	organized unde	r the laws of the	State of	
					T SECRET	
		(Signature of resigni	ng officer/director		SSEE	7
<b>C</b>		(Signature of resigni	mg officer/director)	,	FLORIDA STATE P: 30	

## 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