P05000135304

(Re	equestor's Name)	•
(Ad	ldress)	,
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY DATE
AND ANASSEE FLORID

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COVER LETTER

Division of Corporations
SUBJECT: JOEL CITTER, INC. (Name of Corporation) POSSON 125 204
DOCUMENT NUMBER: PO5000 135 304
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOE. C. C. Mare of Person)
(Name of Person) JOEL Cotter, Inc (Name of Firm/Company)
PO BOX 950103
(Address) Lake Mary, Ha 32795 (City/State and Zip Code)
For further information concerning this matter, please call:
Joel Cotter at (407) 474-9066 (Name of Person) at (407) 474-9066 (Area Code & Daytime Telephone Number)
(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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, DAMON DANTE	, hereby resign as Uice President (Title)
of JOEL CotteR,	of Corporation)
Po5000135304 (Document Number, if known)	, a corporation organized under the laws of the State of
Horida	
Culoma	TESS ST IN
	Signature of resigning officer/director) ARY OF STA

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