

POS000136219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

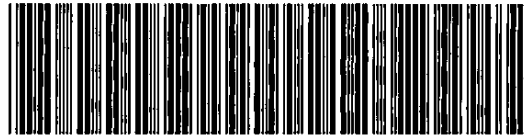
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 22 PM 1:45

B. McKnight AUG 24 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Somkhishvili Inc.
(Name of Corporation)

DOCUMENT NUMBER: 0008760010510

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

Please return all correspondence concerning this matter to the following:

Cori Nott
(Name of Person)

N/A
(Name of Firm/Company)

1313 Lake Idamere Blvd.
(Address)

Tavares, FL 32778
(City/State and Zip Code)

For further information concerning this matter, please call:

Cori Nott at (352) 343-4419
(Name of Person) (Area Code & Daytime Telephone Number)

~~whereas is attached a check for \$350.00 made payable to the Florida Department of~~

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, Cori Nott (formerly Somkhishvili), hereby resign as President
of Somkhishvili inc. (Title)
(Name of Corporation)

905000136219, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Cori Nott-Somkhishvili
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable payable to Florida Department of State and

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS
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