## P05000141458

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Orty/State/Zip/Fnone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: AMBER STUDIO, INC. (Name of Corporation)  DOCUMENT NUMBER: P05000141458
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JURIJUS DUKINAS (Name of Person)
AMBER STUDIO, INC (Name of Firm/Company)
3721 SW 11cT (Address)
CAPE CORAL FL 33914 (City/State and Zip Code)
For further information concerning this matter, please call:
RITA DUKINA at (239) 357-6638 (Name of Person) at (239) 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, JURIJUS DUKINAS, hereby resign as PRESID	PEAIT (Title)
of AMBER STUDIO, INC (Name of Corporation)	,
705000141458, a corporation organized under the laws of the (Document Number, if known)	e State of
·	
(Signature of resigning officer/director)	08 SEP SECRET
FILING FEE IS \$35.00	FILED  08 SEP 17 PM 12: 39  ECRETARY OF STATILLAHASSEE, FLORID

Make checks payable to Florida Department of State and mail to:

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