

POS 000161424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400076482294

06/22/06--01039--001 **35.00

FILED

06 JUN 22 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Be/ur/ao
o/d/les.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: K + M MACHINE SHOP Inc.
(Name of Corporation)

DOCUMENT NUMBER: P05000161424

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

Please return all correspondence concerning this matter to the following:

LESLIE P. MANGALI
(Name of Person)

K + M MACHINE SHOP Inc.
(Name of Firm/Company)

4081 L.B. McLeod Rd Suite D
(Address)

Orlando, Fla 32811
(City/State and Zip Code)

For further information concerning this matter, please call:

KENARD P. MANGALI at (407) 595-2349
(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**

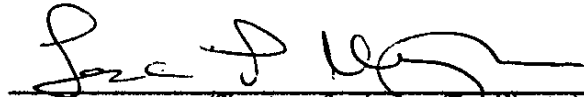
FILED
06 JUN 22 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Leslie P Mongoli, hereby resign as Treasurer
(Title)

of K+M Machine Shop Inc
(Name of Corporation)

P05000161424, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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