

PD6000009321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

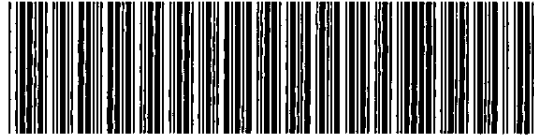
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Knock on Wood , Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000009321

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

Please return all correspondence concerning this matter to the following:

Monique N. Smock VP
(Name of Person)

Knock on Wood , Inc.
(Name of Firm/Company)

28 Cuna Street
(Address)

St. Augustine , FL 32804
(City/State and Zip Code)

For further information concerning this matter, please call:

Monique N. Smock at (407) 235-8568
(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

2007 NOV -6 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

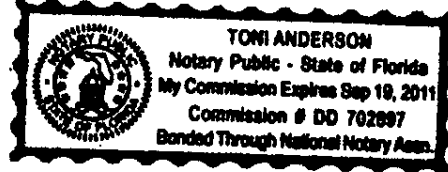
I, Monique N. Smock, hereby resign as Vice President
(Title)

of Knock on Wood, Inc.
(Name of Corporation)

P06000009321, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Monique N. Smock
(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