P0600015173

•
(Requestor's Name)
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04/14/08--01013--004 **35.00



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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Weelez,	Inc.
	(Name of Corporation)
DOCUMENT NUMBER:	PO6000015173
The enclosed Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Barbara Jane Leag (Name of F	ue, Esg. Person)
League & Naugle, (Name of Firm	
3955 Riverside Av	enue, #100
Jacksonville, FL	
(City/State and	Zip Code)
For further information concerni	ng this matter, please call:
Barbara Jane League	at (904) 425-4703 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 n	nade 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, <u>Jas</u>	on D.	Chaloupe	ek .	,	hereby resign	as_	Presiden		reta	ıry,
						,	Treasurer	(Title) and I)irec	tor
of		Weelez,	Inc.							
<u> </u>			(Name of	f Corporation)					
	000151 ocument Nu	73 mber, if known)	_, a corpora	tion organized	uno	der the laws of	the State	of	
Flo	rida									
		- Kr	(Si _i	gnature of res	signing officer/di	irect	en)	SECRETARY OF STATE	0,8 APR 14 PM 4:	FEED

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

FILING FEE IS \$35.00

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