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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: BADON KADON K HAULING INC., (Name of Corporation)
DOCUMENT NUMBER: 206,0000 468 76
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
CAMMIE R. Chaupoin (Name of Person)
BADON KADONK HAULING INC. (Name of Firm/Company)
1624 Clekk CIR (Address)
Geneua FL. 3a73a (City/State and Zip Code)
For further information concerning this matter, please call:
CAMMIE R. Chaupoin at (321) 377-7579 (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

, <u>Camm</u>	1e R.	Chaudor	<u>∕U</u> , hereby res	sign as <u>Prc</u>	SIDENT	
					(Title)	
of BAD	ONKADO	Name of Corpo	uling ING	<u>C.</u>		
P06000	0 468 76 Number, if know	, a co	rporation organ		laws of the Sta	te of
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	Cor	(Signature	e of resigning office	er/director)		OTERS-1 PH
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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