Po600078257

(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



600162344496

resignation

11/12/09--01056--006 **35.00



BOR 11 / 14/09

COVER LETTER

Division of Corporations
SUBJECT: M-5 1-10101,UES INC. (Name of Corporation)
DOCUMENT NUMBER: POLOGO 78257
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
JOZGE SANGSTI (Name of Person)
M-5 1-6101NES -INC (Name of Firm/Company)
(Address)
MiAm PL 33183 (City/State and Zip Code)
For further information concerning this matter, please call:
Take of Person) at (304) 232 5636 (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION SECRETARY OF 1421 1, Jeff Aleman, hereby resign as C-D.D. (Name of Corporation) P-060000 78257, a corporation organized under the laws of the State of (Document Number, if known) Floriday

(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