(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	0111	_



6-23-09



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COVER LETTER

ΓO:	Amendment Section Division of Corporations
SUR.	JECT:XTREME AQUATIC FOODS, INC.
J - 20 - 20 - 10 - 10 - 10 - 10 - 10 - 10	(Name of Corporation)
DOC	UMENT NUMBER:P06000091634
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
	JENNIFER SZUMIGALA
	(Name of Person)
	XTREME AQUATIC FOODS, INC.
	(Name of Firm/Company)
	185 EL PINO DR
	(Address)
	NEW SMYRNA BEACH, FL 32168
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
	JENNIFER SZUMIGALA at (386) 426-5795
	TENNIFER SZUMIGALA at (386) 426–5795 (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations On Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ī.	JENNIFER SZUMIGALA	, hereby resign as	PRESIDENT	
``_			(Title)	
of_	XTREME AQUATIC FOODS,	INC. ne of Corporation)		
	P06000091634 (Document Number, if known)	a corporation organized und	er the laws of the State of	
	FLORIDA	·		
	_ Jenn	fuftumgala (Signature of resigning officer/directo	وسنتر الأن حملا	Secretary of the secret

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