

PD6000092776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

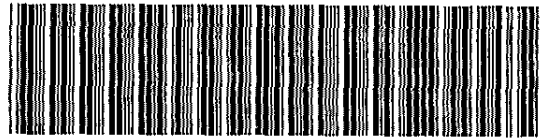
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Miguel Dunkley
advised to make
all corrections.

Office Use Only

OD/Res
@ 2.14.07



400087705504

02/12/07--01053--015 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 FEB 12 PM 3:32

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PATHFIVE CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: PD6000092776

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

Please return all correspondence concerning this matter to the following:

MIGUEL DUNKLEY
(Name of Person)

(Name of Firm/Company)

6201 SW 8th LANE
(Address)

GAINESVILLE, FL 32607
(City/State and Zip Code)

For further information concerning this matter, please call:

MIGUEL DUNKLEY at (352) 281-8738
(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**

I, MIGUEL^{S.} DUNKLEY, hereby resign as President
(Title)

of PATHFIVE CORPORATION
(Name of Corporation)

PO6000092776, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Miguel
(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 FEB 12 PM 3:32

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