

P06000095222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

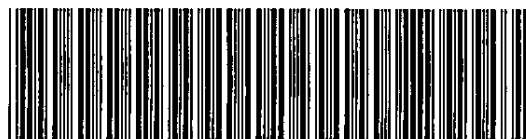
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sole Purpose, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P06000095222

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Solomon

(Name of Contact Person)

Mark Solomon & Co., Inc.

(Firm/Company)

12125 NW 34th Street

(Address)

Sunrise, FL 33323

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Solomon

(Name of Contact Person)

at ( 954 ) 572-5647

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Willie Wright, hereby resign as President  
(Title)

of Sole Purpose, Inc.  
(Name of Corporation)

P06000095222, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Willie J Wright  
(Signature of resigning officer/director)

**FILED**  
**06 NOV 13 AM 9:51**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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