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	PICK-UP	☐ WAIT	MAIL
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Certifie	ed Copies	Certificates	s of Status
Spec	cial Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Chosiers Made Simple, Inc. (Name of Corporation) DOCUMENT NUMBER: PO 6 0 000 95 316
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBERT MARIE (Name of Person)
(Name of Firm/Company)
6779 HOULTON CM. (Address)
(1131030)
LAKE WORTH, FL. 33467 (City/State and Zip Code)
(City/State and Zip Code) For further information concerning this matter, please call:
(Name of Person) at () (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, ROBERT	MARKER	, hereby resign as	PRESIDENT (Title)
of CLOSE	(Name of Cor	SIMPLE TAC.	,
P060800	953/6, a coper, if known)	orporation organized unde	er the laws of the State of
FLD	•		
	Robert	March	Σν
_	(Signaty	fe of resigning officer/director)
	FILIN	G FEE IS \$35.00	2 2 2

Make checks payable to Florida Department of State and mail to:

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