

P06000118632

(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



000138030510

11/20/08--01013--005 \*\*35.00

FILED

2008 NOV 20 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

officer Resignation

TR

11-25-15

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cone Crazy Too, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000118632

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

Please return all correspondence concerning this matter to the following:

Jim Broman

(Name of Person)

Cone Crazy Too, Inc

(Name of Firm/Company)

944 Colonial Grand Lane

(Address)

Lake Mary, Florida 32746

(City/State and Zip Code)

For further information concerning this matter, please call:

Jim Broman

(Name of Person)

at ( 407 ) 920-5417

(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**

**FILED**  
2000 NOV 20 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Marlene Broman, hereby resign as President  
(Title)

of Cone Crazy Too, Inc.  
(Name of Corporation)

P06000118632, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Marlene J Broman  
(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