## P06000124931

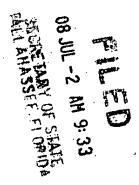
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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0/0 Resign 7-7-08 Dc

## **COVER LETTER**

6.2.08

**TO:** Amendment Section Division of Corporations

SUBJECT: AMIGNO OFFICERS  (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: 00/
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
CISSA DONAHUE, PRESIDENT (Name of Person)
SABATINO ASSOCIATES INC (Name of Firm/Company)
ESOS LAUREC CAKES BLUD (Address)
WAPLES FL 34119  (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (239) 273 - 5430 (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, CAROU SA-BATINO, hereby resign as PRESIDEN	JT
(F	itle)
OF SABATIMO ASSOCIATES INC.	
(Name of Corporation)	
OCC 4 OCI, a corporation organized under the laws of the (Document Number, if known)	e State of
FLORIDA.	
EFFECTIVE DATE OF RESIGNATION JUNE	1 2008
Cor Sabaho President	6.1.2008
(Signature of resigning officer/director)	DATE

## 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

PILED

08 JUL - 2 AM 9: 33

AUXETARY OF STATE