

PU 6000 134525

(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



500081851625

11/20/06--01017--019 \*\*105.00

FILED

06 NOV 20 PM 11:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIN

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SOFRA, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000136525

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

Please return all correspondence concerning this matter to the following:

David C. Crowder  
(Name of Person)

D.C. & Associates, PA  
(Name of Firm/Company)

820 Lake Kathryn Circle  
(Address)

Casselberry, FL 32707  
(City/State and Zip Code)

For further information concerning this matter, please call:

David C. Crowder at ( 407 ) 831-1407  
(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

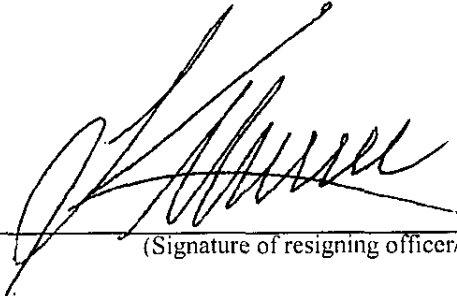
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Kastriot Marku, hereby resign as Vice President  
(Title)

of SOFRA, INC.  
(Name of Corporation)

P06000136525, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**FILED**  
**06 NOV 20 PM 11:20**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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

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