P07000005286

(Re	equestor's Name)
(Ac	ldress)	
(Ac	ddress)	
(Cil	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	,
	•	

Office Use Only



700118610887

02/22/08--01042--023 **35.00

08.FEB 22 AM 8: 2

SECRETARY OF STATE DIVISION OF CORPORATIONS

OD | Res (a) 2/29/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Stonelife Inc.
(Name of Corporation)
DOCUMENT NUMBER: 800084054438
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fill
Please return all correspondence concerning this matter to the following:
Tunc Alp Tarhan
(Name of Person)
(Name of Firm/Company)
6885 Julia Gardens Dr
(Address)
Coconut Creek Fl. 33073
(City/State and Zip Code)
For further information concerning this matter, please call:
Tunc Alp Tarhan at (561) 305 82 99 (Name of Person) at (560) Area Code & Daytime Telephone Number
(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

Tunc Alp Tarhan	, hereby resign as	President, Secretary, Treasu
7		(Title)
of Stone Life Inc.		
(Nam	e of Corporation)	,
800084054438	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida	 •	
Tuc	Alp Tahen	2/16/08
•	(Signature of resigning officer/direc	tor)

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

SECRETARY OF STATE DIVISION OF CORPORATIONS