P07000010566

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Dusiness Fahl), March				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consistent and a Fill Com				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT: Six Strands, Inc
	(Name of Corporation)
DOC	UMENT NUMBER: P07000010566
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Cha	rtes Dardaman
	(Name of Person)
SSI	
	(Name of Firm/Company)
122	44 Treeline Ave #3
	(Address)
Fort	Myers, FL 33913
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Cha	rles Dardaman at (239) 989-0135 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	t Address: Independent Section Identify

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

. Darrin L. Pierce	, hereby resign as VP	
7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Title)
of Six Strands, Inc		
	ne of Corporation)	,
P07000010566 (Document Number, if known)	, a corporation organized under the laws of	the State of
FL	•	
	 ·	
	and LPS	
	(Signature of resigning officer/director)	09 SE
		F J 09 AUG 2 SECRETAF ALLAHASS
		FIL UG 21 HASSEI
	FILING FEE IS \$35.00	ED AM II: L OF STA: 5. FLOR

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

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