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(Re	equestor's Name)	,
(Ad	ldress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

SUBJECT: Tetreauth Schafe Van Scover Gotestainment, Inc

(Name of Corporation)

DOCUMENT NUMBER: POT 0000213782

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Name of Firm/Company)

TOH3 Fauthand Code

(Address)

City/State and Zip Code)

For further information concerning this matter, please call:

Adrea Dean La Scover at (Tall 8444 T344)

(Name of Person)

(Name of Person)

(Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Andrea Dean Van S	OCOLOC, hereby resign as 2001 lice President (Title)
of Tetreault Scholer	Jan Scoyoc Entertainment, Jor.
P070000 2 1 38 2 (Document Number, if known)	_, a corporation organized under the laws of the State of
Florida	·

(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

SECRETARY OF STAT

APPROYEL