P07000025788

<u></u>		
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
`		
		ŀ

Office Use Only



100139048251

12/18/08--01015--016 **35.00

PILED

08 DEC 18 PM W 12

SECRETARY OF STATE
SECRETARY OF STATE

0 D Resign.
116108

COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: Artox Consolidated, Inc.
	(Name of Corporation)
DOG	CUMENT NUMBER: P07000025788
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	se return all correspondence concerning this matter to the following:
Chl	oe Ivanescu
	(Name of Person)
Arte	ox Consolidated, Inc.
	(Name of Firm/Company)
954	Willow Garden Court
******	(Address)
Lak	ke Mary, Florida 32746
	(City/State and Zip Code)
For t	further information concerning this matter, please call:
Cris	tian Ivanescu at (407) 549-5459 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clift 2661	miling Address: Indiment Section Sion of Corporations On Building Executive Center Circle whassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Chloe Ivanescu	, hereby resign as VP/Director	
-	(Title)	
of Artox Consolidated, Inc.		
×*	(Name of Corporation)	
P07000025788	, a corporation organized under the laws of the State of	
(Document Number, if known) , a corporation organized under the laws of the state of	
Florida		
Florida	·	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

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

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