

P070000026417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

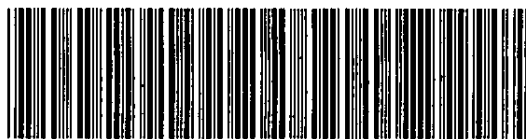
Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only

10B09



600161233456

10/13/09--01010--002 **35.00

FILED
2009 OCT 13 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off
m
86

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LEGENDARY SALES INC.
(Name of Corporation)

DOCUMENT NUMBER: _____

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 BOWSMANN
(Name of Person)

LEGENDARY SALES INC.
(Name of Firm/Company)

1046 YELLOWSTONE PASS
(Address)

CANTONMENT FL 32533
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID BOWSMANN at (407) 923-8856
(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, ALAN B. COMO, hereby resign as VP OF SALES + MKT
(Title)

of LEGENDARY SALES INC.
(Name of Corporation)

PO7000026417, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Alan Como
(Signature of resigning officer/director)

FILED
2009 OCT 13 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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