P07000044860

(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:				
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08 MAY -1 PM 1: 14
SECRETARY OF STATE
SECRETARY OF STATE

0/0 Resign. 5-8-08

Jc

COVER LETTER

TO: Amendme Division o	nt Section f Corporations
SUBJECT: M	OZAJ INC. (Name of Corporation)
	UMBER: P 070000 44860
The enclosed Offi	cer/Director Resignation for a Corporation and fee are submitted for filing
	orrespondence concerning this matter to the following:
	JANOOWALLA (Name of Person)
MDZ	AJ INC, (Name of Firm/Company)
	BLACKWATER DRIVE (Address)
	Y CHAPEL, FL, 33543 (City/State and Zip Code)
For further inform	nation concerning this matter, please call:
MOIZ (N	TANDOWALLA at (813) 731 – 1995 ame of Person) (Area Code & Daytime Telephone Number)
Enclosed is a chec	ck for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corpor Clifton Building 2661 Executive Control Tallahassee, FL 3	rations Division of Corporations Post Office Box 6327 enter Circle Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

l, _	RAJDEEP	PATEL	, hereby resign as	PSD (PRESIDENT))
of_	MOZAJ				
		(Name	of Corporation)		
	(Document Number		, a corporation organized und	er the laws of the State of	
	FLORIDA				
			<u></u> `		
			Afatul		
			Signature of resigning officer/directo	m ≥ 2 0	
				08 MAY -	9
				TAR) ASSI	
				PH TH	
		1	FILING FEE IS \$35.00	STAIL	

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

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