

PC 7000058295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

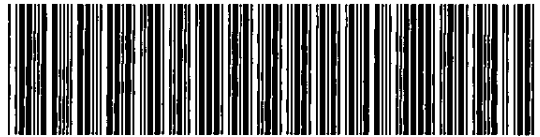
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/18/08--01025--014 \*\*35.00

APPROVED  
AND  
FILED

08 FEB 18 AM 8:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*off resign*

G. Coulllette FEB 18 2008

19

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SPRAY RAYS, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P07000058295

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

Please return all correspondence concerning this matter to the following:

JANA RUBZIN  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

1-7738 MATHANS DRIVE  
(Address)

TAMPA FL 33647  
(City/State and Zip Code)

For further information concerning this matter, please call:

JANA RUBZIN at ( 813 ) 713-2874  
(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

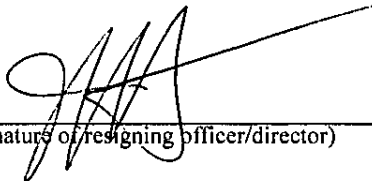
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JANA RUBZIN, hereby resign as VICE PRESIDENT, SECRETARY & DIRECTOR  
(Title)

of SPRAY RAYS, INC,  
(Name of Corporation)

P 070000 58295, a corporation organized under the laws of the State of  
(Document Number, if known)

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

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