

PO7000070240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

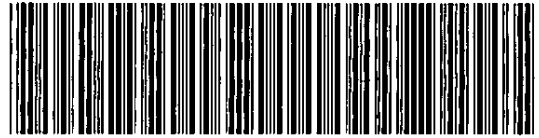
(Business Entity Name)

(Document Number)

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08/20/09--01022--004 \*\*35.00

*Dr. Lin Keys*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 AUG 20 AM 11:32

T Roberts AUG 21 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 1616360, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P 07000070240

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

Please return all correspondence concerning this matter to the following:

LAURA OLSEN  
(Name of Person)

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

31430 50TH AVE SW  
(Address)

FEDERAL WAY, WA 98023  
(City/State and Zip Code)

For further information concerning this matter, please call:

LAURA OLSEN at ( 253 ) 835-7435  
(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**


**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**  
**09 AUG 20 AM 11:32**

I, LAURA OLSEN, hereby resign as VICE PRESIDENT  
(Title)

of 1914360, INC.  
(Name of Corporation)

P07000070240, 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