

PO7000105843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

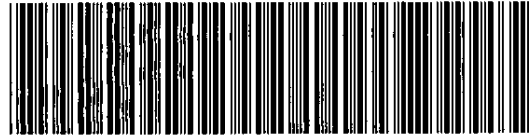
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

on design
C.COULLIETTE

JUL 07 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Creations To Live By, Inc
(Name of Corporation)

DOCUMENT NUMBER: P07000105843

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

HANS MAGUHN
(Name of Person)

Creations To Live By, Inc.
(Name of Firm/Company)

P.O. Box 451093
(Address)

Kissimmee FL 34745
(City/State and Zip Code)

For further information concerning this matter, please call:

HANS MAGUHN at (407) 873-0569
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 JUL -7 AM 10: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 28, 2011

HANS MAGUHN
CREATIONS TO LIVE BY, INC.
PO BOX 451093
KISSIMMEE, FL 34745

SUBJECT: CREATIONS TO LIVE BY, INC.
Ref. Number: P07000105843

We have received your document for CREATIONS TO LIVE BY, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The person you have listed as agent is not the current registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 011A00015515

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CREATIONS TO LIVE BY, INC.
(Name of Corporation)

DOCUMENT NUMBER: P07000105843

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

Please return all correspondence concerning this matter to the following:

HANS MAGUHN

(Name of Person)

Creations To Live By, Inc.

(Name of Firm/Company)

P.O. Box 451093

(Address)

Kissimmee FL 34745

(City/State and Zip Code)

For further information concerning this matter, please call:

HANS MAGUHN

(Name of Person)

at (407) 873-0569

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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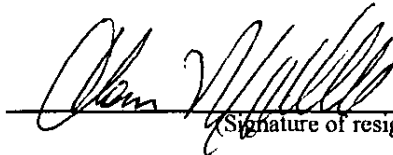
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, HANS MAGUHN, hereby resign as VP (Title)

of CREATIONS TO LIVE BY, INC.
(Name of Corporation)

P07000105843, 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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TALLAHASSEE, FLORIDA