

P07000131023

(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



200121812672

04/02/08--01012--019 **35.00

FILED

08 APR -2 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01286
4-7-08

COVER LETTER

TO: . Amendment Section
Division of Corporations

SUBJECT: KOCHURYPAANA CORP
(Name of Corporation)

DOCUMENT NUMBER: P-07000131023

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

Please return all correspondence concerning this matter to the following:

AHMED MD M
(Name of Person)

KOCHURYPAANA CORP
(Name of Firm/Company)

1735 BRANTLY ROAD UNIT-1802
(Address)
FORT MYERS- FL- 33907
1735 BRANTLY ROAD
(City/State and Zip Code)

For further information concerning this matter, please call:

TAPASH RASHID at (239) 826-3684
(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, AHMED, MD M, hereby resign as PRESIDENT
(Title)

of KOCHORY PAANA CORPORATION
(Name of Corporation)

D07000131023, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

md. Mohamed Ahmed
(Signature of resigning officer/director)

FILED
08 APR - 2 PM 1:59
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