

P08000041739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

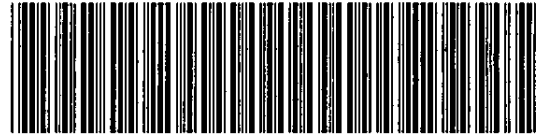
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100135529961

*Resignation
to officer*

09/11/08--01044--020 **35.00

2008 SEP 11 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DR

9/15/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAXX ALLSTARS, INC
(Name of Corporation)

DOCUMENT NUMBER: P08000041739

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

Please return all correspondence concerning this matter to the following:

SHAWNETTE MOLL

(Name of Person)

(Name of Firm/Company)

5832 FISHCROW PLACE

(Address)

LAND O LAKES, FLORIDA 34639

(City/State and Zip Code)

For further information concerning this matter, please call:

SHAWNETTE MOLL

(Name of Person)

at (813) 244-1039

(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

2008 SEP 14 PM 4:01

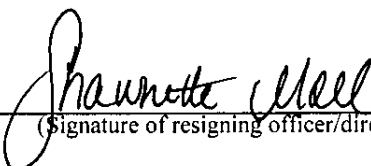
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, SHAWNETTE MOLL, hereby resign as VICE PRESIDENT
(Title)

of MAXX ALLSTARS, INC
(Name of Corporation)

P08000041739, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 9/4/08
(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