

PO80000541753

(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



400148518654

04/06/09--01020--015 **35.00

FILED
09 APR -6 AM 11:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

601817
D
7

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Plan Incorporated 2008

DOCUMENT NUMBER: P08000054753
(Name of Corporation)

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

Please return all correspondence concerning this matter to the following:

Lisa Lenn

(Name of Person)

The Plan B Incorporated 2008

(Name of Firm/Company)

422 E. Raehn Street

(Address)

Orlando, Florida 32806

(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Lenn

(Name of Person)

at (407) 9689096

(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:

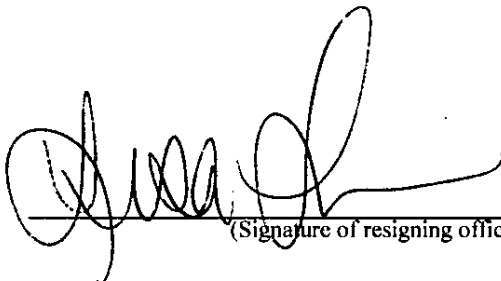
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Lisa Lenn, hereby resign as Secretary
(Title)

of The Plan B Incorporated 2008,
(Name of Corporation)

P08000054753, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(Signature of resigning officer/director)

FILED
09 APR -6 AM 11:21
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