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SECRETARY OF STATEA
TALLAHASSEE, FLORIBA
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COVER LETTER

SUBJECT: IZZY KODZie Inc. (Name of Corporation)
(
DOCUMENT NUMBER: P0800062349
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Myra B. Sanche Z (Name of Person)
(Name of Firm/Company)
9117 Post OAK Ct. (Address)
TAMPA FC 3-3(015) (City/State and Zip Code)
For further information concerning this matter, please call:
Myra B. Sarchez at (813) 368-5797 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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