Po8000019503

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phon	e #)
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Amendment Section

Division of Corporations

TO:

SUBJECT: BISCUITS AND BOWS, INC
(Name of Corporation)
DOCUMENT NUMBER: P08000079503
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOANN H GRANT
(Name of Person)
Discuits & Bows, Inc. (Name of Firm/Company)
5005 N Travelers Palm Lane
(Address)
Tamarac, FL 33319
(City/State and Zip Code)
For further information concerning this matter, please call:
JOANN H GRANT at (954) 733.7515 (Name of Person) (Area Code & Daytime Telephone Number)
(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
My name reas lested as an officer without my knowledge.

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

JOANN H GRANT	, hereby resign as Treasurer
,	(Title)
of BISCUITS AND BOWS, INC	
(Name	of Corporation)
P08000079503 (Document Number, if known)	a corporation organized under the laws of the State of
Florida	<u> </u>
	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

SEGULIARY OF SEATE