

(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:	(Requestor's Name)	-	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	-	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	-	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)	•	
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL		
Certified Copies Certificates of Status	(Business Entity Name)	-	
	(Document Number)	- v, ,	
Special Instructions to Filing Officer:	Certified Copies Certificates of Status	• • •	٠.
	Special Instructions to Filing Officer:		
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08/06/09--01039--001 **35.00

COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT:	Openial	Mobile	Prod	uctions ion)	Ina
	0	(Nam	ne of Corporat	ion)	•
DOCUMENT	NUMBER: <u>}</u> <u>L</u>) 4 0000	58972	· <u>/</u>	
The enclosed O	fficer/Director Res	signation for a	Corporation a	and fee are subn	nitted for filing.
Please return all	l correspondence c	concerning this	matter to the	following:	
A1	Exande a (Name of Pe	B055			
	(Name of Fe	arson)			
	(Name of Firm/C	Company)			
22	995 5.W (Address	1. 9h C	14.		
					n tanganan manadan
	(City/State and Z	Zip Code)	\mathcal{U}		
For further info	rmation concerning	g this matter, pi	lease call:		
	undea Bos	3 at (305	401 - 7	176
((Name of Person)		(Area Code &	& Daytime Telep	hone 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, <u>Alexandea</u>	B055_	, hereby resign as	Vice (Ti	Prcesideni	+
of Occhid 1	Mobile //	Roductions,	Inc.	,	
(Document Number, if know	4 a corpor	ration organized under	r the laws of the	State of	
Floridg	·				
•			-	2009 AUG SECRET	
	Abantiza ba	esigning officer/director)		TARY OF	M
				9: 23 FLORID	

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