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Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
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TALL ABASSES STATE

APPROVEL AND FILED



## **COVER LETTER**

Division of Corporations
SUBJECT: EAST LAUGUSCULE COUP (Name of Corporation)  DOCUMENT NUMBER: PO90000 77/09
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
FAST LANGER OF FIRM/Company)  3430 DOLY OPHINDOWN OF 109  (City/State and Zip Code)
For further information concerning this matter, please call:
HOWARD MAWW at (954, 566-5185) (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

TO: Amendment Section

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, GRERARDM. FORKETER, hereby resign as DIROCTOR

OF LAST NAME OF Corporation)

(Name of Corporation)

(Document Number, if known)

FRORING.

(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