## 110000006841

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	y/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Moxx USA, Inc.	
	(Name of Corporation)
DOCUMENT NUMBER: P100	00006841
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence con	cerning this matter to the following:
Kai Schulz	
(Name of Person	n)
Moxx USA, Inc.	
(Name of Firm/Cor	npany)
1604 SW 17TH AVE	
(Address)	
CAPE CORAL FL 33991	
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
Kai Schulz	at ( 239 ) 233-6005 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

10 APR 26 AM 11:21

CTitle)

Stephan Pehns	, hereby resign as	Secretary	G
"	, norday resign as	(Title)	
of Moxx USA, Inc.			
	ame of Corporation)		_,
P10000006841	, a corporation organized ur	nder the laws of the State of	
(Document Number, if known)	. 5		
Florida	·		
	1		

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314