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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
Resignation of Officer SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P10000016663	• •
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing
Please return all correspondence concernia	ng this matter to the following:
Michael J Bodah	
(Name of Person)	
Florida Accounting Associates PA	
(Name of Firm/Company)
2443 Pinewoods Cir	
(Address)	
Naples FL 34105	
(City/State and Zip Code)
For further information concerning this m	atter, please call:
Michael Bodah	at () (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made paya	ble to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

hereby resign as	
(Title)	
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oration)	
rporation organized under the laws of the State of	

(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