

P100000016983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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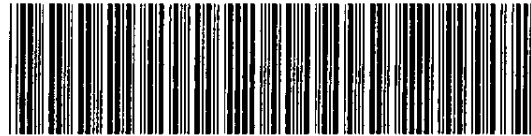
(Business Entity Name)

(Document Number)

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@ 3/7/11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SOLAK(US), INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000016983

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SOLOMON AKINJAYEJU

(Name of Person)

SOLAK(US), INC.

(Name of Firm/Company)

8103 BIG PINE WAY

(Address)

RIVIERA BEACH, FL 33407

(City/State and Zip Code)

For further information concerning this matter, please call:

SOLOMON AKINJAYEJU at ( 561 ) 713-5107  
(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

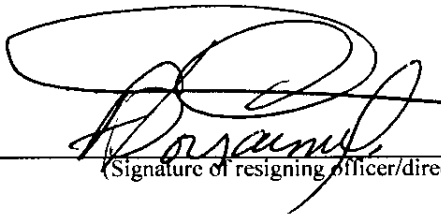
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, FRANCOIS DORSAINVIL, hereby resign as DPST  
(Title)

of SOLAK(US), INC.  
(Name of Corporation)

P10000016983, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(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

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DIVISION OF CORPORATIONS  
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