

P/00000 18676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SkyLarx Systems, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P10000018676

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

Please return all correspondence concerning this matter to the following:

Marcelo Agui

(Name of Person)

SkyLarx Systems, Inc.

(Name of Firm/Company)

3625 State Road 419 #230

(Address)

Winter Springs, FL 32708

(City/State and Zip Code)

For further information concerning this matter, please call:

Wiley Martin

(Name of Person)

at (407) 749-8808

(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

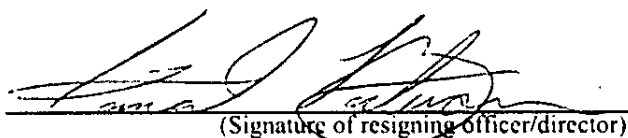
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Kamal Batemon, hereby resign as Treasury Director (TD)
(Title)

of SkyLarx Systems, Inc.
(Name of Corporation)

P10000018676, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

10/11/2012
2:12 PM
FILED
TALLAHASSEE, FLORIDA

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