P10000048862

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The Resignation C.COULLIETTE

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EXAMINER



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: OM DISTRIBUTOR, INC. (Name of Corporation)
DOCUMENT NUMBER: P 0000048862
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SEJALBEN PATEL (Name of Person)
(Name of Firm/Company)
853 Easle view drue (Address)
Tallahassee, FL, 32211
(City/State and Zip Code) For further information concerning this matter, please call:
Mine Istel. at (850) 491-5383 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Sejallen Refel , hereby resign as office (Title) of OM distributor, Inc. (Name of Corporation) P100000 48862 , a corporation organized under the laws of the State of Elonida.	·····
(Document Number, if known)	
P100000 48862 , a corporation organized under the laws of the State of (Document Number, if known)	,
(Document Number, if known)	
Florida.	
•	
S.M.Patel	
(Signature of resighing officer/director)	
Esta de la companya	777
)
FILING FEE IS \$35.00	7 T T T T T T T T T T T T T T T T T T T
FILING FEE IS \$35.00	2

Amendment Section

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

Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314