

P/000005/240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

3/54

Office Use Only



800256033358

02/10/14--01020--032 **87.50

FILED

14 MAR 31 PM 4:01

OD
Resign.

4/7/14

Dr.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2014

MARIE FULOP
OLD SCHOOL MUSCLE INC
2518 SW 31ST LANE
CAPE CORAL, FL 33914

SUBJECT: OLD SCHOOL MUSCLE INC
Ref. Number: P10000051240

We have received your document and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

OUR RECORDS REFLECT THAT THE CURRENT REGISTERED AGENT FOR THE CORPORATION IS JACK FULOP. MARIE FULOP IS LISTED AS THE PRESIDENT OF THE CORPORATION. WE ARE ENCLOSING THE OFFICER/DIRECTOR RESIGNATION FORM WHICH WOULD BE THE CORRECT FORM TO USE FOR RESIGNING AS THE PRESIDENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 614A00003358

RECEIVED
14 MAR 31 AM 10:25
DIVISION OF CORPORATIONS
STATE OF FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Old School Muscle Inc.
(Name of Corporation)

DOCUMENT NUMBER: P10000051240

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

Please return all correspondence concerning this matter to the following:

Marie Fulop
(Name of Person)

(Name of Firm/Company)

2518 SW 31st Lane
(Address)

Cape Coral, FL 33914
(City/State and Zip Code)

For further information concerning this matter, please call:

Marie Fulop at (239) 225-3624
(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
P.O. Box 6327
Tallahassee, FL 32314

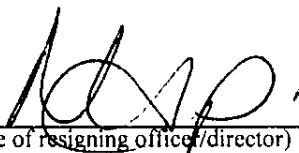
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Marie Fulop, hereby resign as President
(Title)

of Old School Muscle, Inc.
(Name of Corporation)

P1000051240, 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

RECEIVED
MAR 31 2011

14 MAR 31 PM 4:01

FILED