

P100000063040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

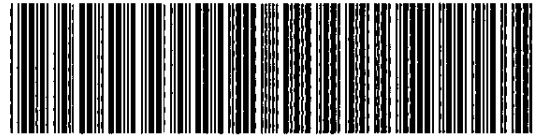
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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100210234281

*Resignation
to officer*

07/25/11--01054--009 **35.00

FILED
2011 JUL 25 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*RR
7/26/11*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bobecorp, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P10000063040

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

Please return all correspondence concerning this matter to the following:

Kathryn Bobe'

(Name of Person)

Bobecorp, Inc.

(Name of Firm/Company)

9363 Lake Serena Drive

(Address)

Boca Raton, FL 33496

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard R. Bobe'

(Name of Person)

at (561) 330-4177

(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**

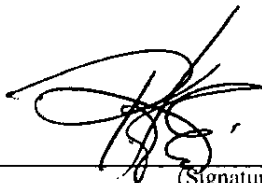
2011 JUL 25 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Kathryn Bobe', hereby resign as Secy/Treas
(Title)

of Bobecorp, Inc.
(Name of Corporation)

P10000063040, 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