

P10000069334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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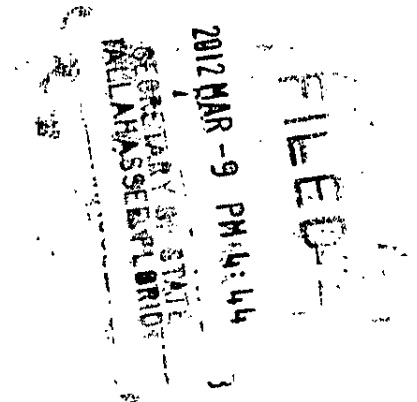
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Resignation
Ob Oggeen

03/09/12--01011--009 **35.00



RR
3/13/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGNATION AS ASST. SECRETAR OF GISELLE CORP
(Name of Corporation)

DOCUMENT NUMBER: P10000069334

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

Please return all correspondence concerning this matter to the following:

Joe B. Weeks
(Name of Person)

Giselle PNC
(Name of Firm/Company)

16 B. E. Washington ST.
(Address)

QUINCY, FL 32351
(City/State and Zip Code)

For further information concerning this matter, please call:

Joe B. Weeks at (904) 509-1002
(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**

FILED
2012 MAR -9 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JOE B. WEEKS, hereby resign as ASST. SECRETARY
(Title)

of GISELLE INC
(Name of Corporation)

P1000069334, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Joe B. Weeks
(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