

P10000094344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



400241504154

FILED
12 DEC 10 PM 3:26
RECEIVED

Special Instructions to Filing Office

Spoke with
Lyn Shoffstall
on 12/5/12 & he
said to process with
copy of front & back
of check.

Office Use Only

Spoke with 12/10/12
Imre Szatrics
& he said he cannot
make out member on
Back of check.

O/D Resign.

12-10-12
DC

CHECK PROCESSED
ON 11/9/2012

FRONT IMAGE

3139



ACH RTT 08100052
64-5-610

11/06/2012

Imworld Services, Inc.
425 Wittenridge Ct.
Alpharetta, GA 30022

PAY
TO THE
ORDER OF

Florida Department of State

Thirty-Five and 00/100

Florida Department of State

\$ 35.00
DOLLARS

AUTHORIZED SIGNATURE

MEMO

Nicopro USA, Inc.

⑈003139⑈ ⑆061000052⑆ 00325266144⑈ ⑆0000003500⑆

Security Features. Details on back

BACK IMAGE

BANK OF AMERICA
101100181 E228 P2 P03
11/13/12
050574012

000-450453-9104-20796
11/09/12--01013--034



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2012

IMRE SZAFRICKS
IMWORLD SERVICES INC
425 WITTENRIDGE CT
ALPHARETTA, GA 30022 US

SUBJECT: NICOPRO USA, INC.
Ref. Number: P10000094344

We have received your document for NICOPRO USA, INC. and copy of the front and back of the check totaling \$35.00. However, the document has not been filed and is being retained in this office for the following reasons:

The copy of the back of the check is illegible. Please call our office concerning the validation shown on the back of the check submitted for payment to file the officer/director resignation.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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: 012A00028856

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Nicopro USA, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P10000094344

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

Please return all correspondence concerning this matter to the following:

Imre Szafrics

(Name of Person)

Imworld Services, Inc.

(Name of Firm/Company)

425 Wittenridge Ct

(Address)

Alpharetta GA 30022

(City/State and Zip Code)

For further information concerning this matter, please call:

Imre Szafrics

(Name of Person)

at (**770**) **752-8780**

(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
409 E. Gaines Street
Tallahassee, FL 32399

CR2E044 (03/12)

RECEIVED

12 NOV -9 AM 10:20

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2012

IMRE SZAFRICKS
IMWORLD SERVICES INC
425 WITTENRIDGE CT
ALPHARETTA, GA 30022 US

SUBJECT: NICOPRO USA, INC.
Ref. Number: P10000094344

We have received your document for NICOPRO USA, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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) 245-6820.

Rebekah White
Regulatory Specialist

Letter Number: 812A00027533

CHECK WAS ENCLOSED IN ORIGINAL FILING

AND IS PROCESSED BY YOUR OFFICE ON

11/15/12

SEE ATTACHED PROOF

RECEIVED
12 NOV 29 AM 11:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

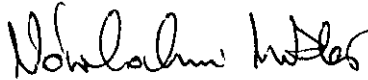
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Nicopro, KFT, hereby resign as Director
(Title)

of Nicopro USA, Inc.
(Name of Corporation)

P10000094344, 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

FILED
12 DEC 10 PM 3:26
TALLAHASSEE, FL