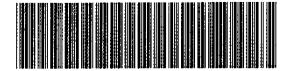
## P11000011494

(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:						
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: ILF Toc. (Name of Corporation)
DOCUMENT NUMBER: P11000011494
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Evan Hancek (Name of Person)
(Name of Firm/Company)
2030 Galahad Dr (Address)
Deltona Fl. 32738 (City/State and Zip Code)
For further information concerning this matter, please call:
Evan Hancel at (386) 734 5229 (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,	Evan	Hazeack		_, hereby res	ign as	lice	President	_
				- · · · ·			(Title)	
of_	I.L.F	Inc.	ne of Corporati	on)		·		•
	P110000114	194	•		zed under t	he laws	of the State of	
	(Document Num	nber, if known)	•					
	1 101144		•					
						_		
			(Signature of	resigning office	er/director)		<u></u>	

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

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SECULTARY OF STATE DIVISION OF CORPORATIONS