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## **COVER LETTER**

Amendment Section TO: Division of Corporations

·
SUBJECT: DJP SWEEP FUN SUMMER FEILD FNZ (Name of Corporation)
DOCUMENT NUMBER: P 1 0000 22 665
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sohn Casa (45Pho (Name of Person)
DSP Sweepfun Summenter/DINC (Name of Firm/Company)
14335 S. High Way 441
SUMMERFEID F/1 34491 (City/State and Zip Code)
For further information concerning this matter, please call:
John (184/58100 at (252) 5/6-7682

(Area Code & Daytime Telephone Number) (Name of Person)

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

i, James	Co/e	, hereby resign as	Secotual (Title)	4
of 03P S	Weep Fry (Name of Corporation	SUMMPR F	ieln In	<u> </u>
(Document Number,	22665, a corpora	ation organized under	the laws of the State	e of
Floring	·			
	De ble		į	7.8. 2
	(Signature of re	esigning officer/director)	74 A. S.	
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				9 5

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314