

P/1000024191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

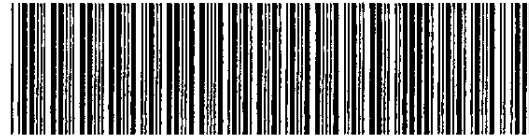
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000206958620

11/01/11--01023--006 \*\*35.00

*SP/DO Rsign*

FILED  
11 NOV - 1 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THAI HERM USA, INC

(Name of Corporation)

**DOCUMENT NUMBER:** P11000024191

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

Please return all correspondence concerning this matter to the following:

PITAK HERMKHUNTHOD

(Name of Person)

THAI HERM USA, INC

(Name of Firm/Company)

3455 FILLMORE ST.

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

PITAK HERMKHUNTHOD

at ( 954 ) 826-1323

(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**  
11 NOV -1 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

I, SUPARAT HERMKHUNTHOD, hereby resign as PRESIDENT  
(Title)

of THAI HERM USA, INC.  
(Name of Corporation)

P11000024191, 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