Office Use Only



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04/09/12--01052--015 **35.00







COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Godin V.	(Name of Corporation)
DOCUMENT NUMBER: $\frac{P_{12}}{}$	100000 1226
The enclosed Officer/Director Resigna	ation for a Corporation and fee are submitted for filing
Please return all correspondence conce	erning this matter to the following:
William VAN (np
(Name of Person) Codin Var Ca (Name of Firm/Comp	<i>)</i>
97 Shortue Dr (Address)	
City/State and Zip Co	
For further information concerning this	,
(Name of Person)	at (<u>B50</u>) <u>Z32 - 0594</u> (Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Michelle God	Van Camp N Van Can	, hereby resign as	Secretary (Title)
	(Name of Co	orporation)	nder the laws of the State of
	M	1()	
	(Signal	ture of resigning officer/direct	2 12 AF

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