

P1300000 1924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

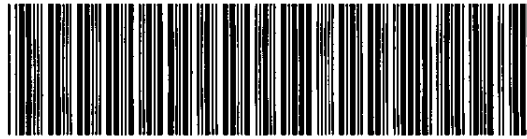
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000261024340

06/12/14--01023--005 **35.00

QDPS

JUN 25 2014

R. WHITE

14 JAN 2 1972 OK

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: US ONE MM ONE INC
(Name of Corporation)

DOCUMENT NUMBER: P13000001924

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

Please return all correspondence concerning this matter to the following:

CHESTER SCHMEELK
(Name of Person)

US ONE MM ONE INC
(Name of Firm/Company)

PO BOX 330507
(Address)

ATLANTIC BEACH FL 32233
(City/State and Zip Code)

For further information concerning this matter, please call:

Craig Johnson at (904) 429 4748
(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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BRIAN SCHMEELK, hereby resign as SECRETARY
(Title)

of US ONE MM ONE INC,
(Name of Corporation)

P13000001924, a corporation organized under the laws of the State of
(Document Number, if known)

FL


(Signature of resigning officer/director)

16 JUN 10 11:04 AM
Filing Office
Tallahassee, Florida

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