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TRANSMITTAL LETTER

TO: **Amendment Section** Division of Corporations **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Person) (City/State and Zip Code) For further information concerning this matter, please call: (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

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P1300059335 (Document Number, if known) Hoverda	, a corporation organized unde			69	18.
Christina M. Insalaco State of Florida MY COMMISSION EXPIRES 04/25 COMMISSION # EE 193039 Bonded Thru Notary Public Under		r)			
	FILING FEE IS \$35.00		SECRE TALLAHAS	- AON 11	Micey.
Make checks payab	Amendment Section Division of Corporations P.O. Box 6327	te and mail to:		3 PH 4: 58	income.

Tallahassee, Florida 32314