## P140000 92239

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



600270593146

03/16/15--01011--014 \*\*35.00

15 HAR 16 PH 3:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

MAR 1 6 2015 T. CARTER

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Phones Un Lineted Inc. (Name of Corporation)
DOCUMENT NUMBER: P(40000 92239
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Chaile, Genty (Name of Person)
(Name of Firm/Company)  Accounting - Try Associates
(Address)
Cloar a for Fl 33767 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (767) 330-6964 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 MAR 16 PH 3: 37

I, Mon ala Zahreddiny, hereby resign as VICO Presidory
(Title)
of Phones On Lindon Inc (Name of Corporation)
(Name of Corporation)
(Document Number, if known), a corporation organized under the laws of the State of
Florda
(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