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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
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Certified Copies	Certificates	s of Status
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TRANSMITTAL LE	TTER
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TO: Amendment Section Division of Corporations

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SUBJECT:	BOLD	ART	DESIGN	
			(Name of Cor	rporation)
DOCUMENT NUMBER:_		P150	00060) 349

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

Please return all correspondence concerning this matter to the following:

Shelly Cox Vander Meulen Bold Art Design Corp (Name of Firm/Company) 11574 153 rd CT, N, (Address) Jupiter, Florida 33478 (City/State and Zip Code)

For further information concerning this matter, please call:

Vandermeulen Shelly at (54) 307 - 8531 (Area Code & Daytime Telephone Number) (Name of Person)

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



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1, Shelly	Cox		_, hereby resig	mas_Vice	President ² (Title)
of Bold		Design			,
P150000 (e (Document Nu Floricla	_	· ·		ed under the la	ws of the State of

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(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