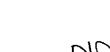
Phosp36445

(Requestor's Name)	
(Address)	
(Address)	
(waster,	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	L
(Business Entity Name)	
(Document Number)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: D2 Pack INC (Name of Corporation)
DOCUMENT NUMBER: 16000036445
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)
(Name of Firm/Company)
4770 Biscaune Blud Suite 1470 (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (786) 281-2632. (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Rosmilar C.	hereby resign as Res	(Title)
of O2 Pack	Name of Corporation)	
_	a corporation organized under the	laws of the State of
Florida	·	
	(Signature of resigning officer/director)	NON Zi
	FILING FEE IS \$35.00	19:47 19:47

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314