1295000060261

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300262388883

07/24/14--01029--010 **745.00

14 JUL 24 AH 9: 50

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: MCG/ego Daks, (Name of Corporation)	_		
DOCUMENT NUMBER: P 95 00 00 60 261			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fi	ling.		
Please return all correspondence concerning this matter to the following:			
Robert Nalt			
McGlegn Daks,			
Name of Firm/Company) 186 Randall Road	10000000000000000000000000000000000000	14 JUI	
(Address) Hat Speings, R. 71913 (City/State and Zip Code)		24 AH	manuscript of the second of th
For further information concerning this matter, please call:		9: 50	*.,
Robert Malt at (501) 525 - 802 (Area Code & Daytime Telephone Number	_		

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

à

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, David G. Malt, hereby resign as Di	1ector		
of McGugn Daks, Inc. (Name of Corporation)	(Title)		,
P95 0000 60 26, a corporation organized under the laws	s of the State	of	
<u></u>			
(Signature of resigning officer/director)	一 では 一 では 大学 には 大学 には ななな になった。 になった。	14 JUL 24	
	10 h	#K 9: 50	,

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