

P950000068079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

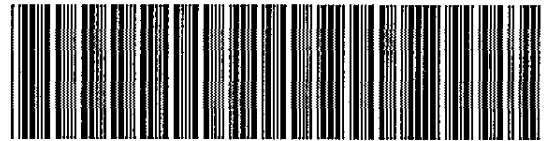
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06 MAR -2 PM 3:00  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TRUKINA ENTERPRISE, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P96000068079

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

Please return all correspondence concerning this matter to the following:

KIRIT R. PATEL

(Name of Person)

TRUKINA ENTERPRISE, INC.

(Name of Firm/Company)

5625 N. ATLANTIC AVE.

(Address)

COCOA BEACH, FL. 32931

(City/State and Zip Code)

For further information concerning this matter, please call:

KIRIT R. PATEL

(Name of Person)

at

321 784-8433

(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

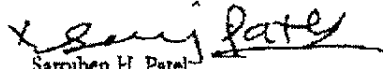
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, SAROJBEN H. PATEL hereby resign as PRESIDENT  
(Title)

of TRUKINA ENTERPRISE, INC.  
(Name of Corporation)

P95000068079 a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
Sarojben H. Patel  
Present President and CEO

(Signature of resigning officer/director)

FILED  
06 MAR -2 PM 31 00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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