

P95000069516

(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



200160222772

09/14/09--01004--013 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 SEP 14 AM 9:11

FILED

off. Resign.

TB

SEP 17 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 2 PLEASE DISTRIBUTING, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P 950000 69516

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

Please return all correspondence concerning this matter to the following:

SHERRI WILLIAMS

(Name of Person)

2 PLEASE DISTRIBUTING, INC.

(Name of Firm/Company)

7885 BOCA CIEGA DRIVE

(Address)

ST. PETE BEACH, FL 33706

(City/State and Zip Code)

For further information concerning this matter, please call:

SHERRI WILLIAMS

(Name of Person)

at ( 727 ) 363-6933

(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, DAVE SMITH, hereby resign as DIRECTOR  
(Title)

of 2 PLEASE DISTRIBUTING, INC.  
(Name of Corporation)

P95000069516, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
2009 SEP 14 AM 9:11  
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