96000062372

| (Requestor's Name) | | | |
|---|-------------------|-----------|--|
| (Address) | | | |
| (Ad | dress) | | |
| (Cit | y/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Nan | ne) | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
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| | <u></u> | | |

Office Use Only



300089259083

02/27/07--01026--022 **35.00

2007 FEB 27 AM 9: 26

Ballo7,

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

Street Address:

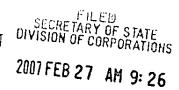
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

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

at (954) 559-3492 (Area Code & Daytime Telephone Number)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



| I, WANDHER SOUZA | , hereby resign as | PRESIDENT |
|--|-------------------------------|-----------------------------|
| | | (Title) |
| of O-COPY, INC (Name of Corpora | ation) | , |
| <u>P960000 623+2</u> , a corp (Document Number, if known) | oration organized unde | er the laws of the State of |
| FLORIDA. | | |
| | | |
| lec | | |
| (Signature o | 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