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(Requestor's Name) (Address) (Address)	100148520311
. (City/State/Zip/Phone #)	04/06/0901032027 **35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 2009 APR -6 AM 9: 13 SECRETARY OF STATE TALLAHASSEE. FLORIDA
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: JAPTRIX INCORPORATED

Q,

(Name of Corporation)

DOCUMENT NUMBER: P96000070015

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

Please return all correspondence concerning this matter to the following:

ROGER ACHAM

(Name of Person)

(Name of Firm/Company)

9756 SADDLE CT

(Address)

LK WORTH FL 33467

(City/State and Zip Code)

For further information concerning this matter, please call:

ROGER ACHAM

(Name of Person)

at (<u>561</u>) 713-3434 (Area Code & Daytime Telephone Number)

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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 <u>Mailing Address:</u> Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

	ECTOR RESIGNATION CORPORATION	
I, ROGER ACHAM	, hereby resign as(Title)	
of JAPTRIX INCORPORATED		
(Name of Corp	oration)	,
P96000070015 (Document Number, if known) FLORIDA	orporation organized under the laws of the State of	
La uyuk	TALLAHE re of resigning officer/director)	
ł	-6 AM 9: 13 SSEE, FLORIDA	
FILIN	G FEE IS \$35.00	

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

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