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EXAMINER

COVER LETTER

SUBJECT: MAGNUM INVESTMENTS, INC. (Name of Corporation) DOCUMENT NUMBER: P97000037801 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filir Please return all correspondence concerning this matter to the following: MAHLON J. CARE (Name of Person)
DOCUMENT NUMBER: P97000037801 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filir Please return all correspondence concerning this matter to the following: MAHLON J. CARE
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filir Please return all correspondence concerning this matter to the following: MAHLON J. CARE
Please return all correspondence concerning this matter to the following: MAHLON J. CARE
MAHLON J. CARE
(Name of Person)
N/A
(Name of Firm/Company)
6243 OLD RANCH ROAD
(Address)
SARASOTA, FLORIDA 34241
SARASOTA, FLORIDA 34241 (City/State and Zip Code)
For further information concerning this matter, please call:
MAHLON J. CARE at (941) 923-7897 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (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, _	MAHLON J. CARE	, hereby resign as_	1ST	VICE	PRESIDENT	
					(Title)	
of_	MAGNUM INVESTMENTS,	INC.				
	(Nan	ne of Corporation)				
	P97000037801	, a corporation organized under the laws of the State of				
	(Document Number, if known)					
	FLORIDA					
<u>_</u>		·				

(Signature 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