Requestor's Name

Admss

City/S ate/Zip Phone #

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.					
(Co	orporation Name)	(Docu	ment #)		
2(Co	orporation Name)	(Docu	ment #)		
3(Cc	orporation Name)	(Docu	ment#)	TALL	978
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NonProfit	Resignation of R.	A., Officer/ Directo			
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· Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

Ι,_	NEIL MAC	KINNON		_ •	, hereby resign as_	PRES.,		TREAS	,
					,,,	(Titl	e)		-
of	DOLLAR	BILLS	PLUS	INC.	oration)		<u>.</u>	****	•
			(IVAIII	c or corp.	Jiauon)				
a co	rporation organized	under the la	ws of the	State of	FLORIDA		TAEC	97 8	_
and :	affirm that the corpo	oration has b	een notif	ied in wr	riting of the resigna	ation.	HASSEE, FL	SEP -4 EM	
		Na	if N	ature of re	esigning officer/direct	tor)	CHDA CHIDA	<u> </u>	=

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314