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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
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COVER LETTER

Division of	Corporations		•
SUBJECT:	SALIN	(Name of Corpo 2470000669	oration)
DOCUMENT NUI	MBER: f	47000666	87
	<u>-</u>		on and fee are submitted for filing.
	•	ncerning this matter to	· ·
•	OESA; (Name of Pers	,	_
Prance	A-CLOUNTING	· ₹ TA ⊁ mpany)	_
7087 GRA		LDE SE 107	-
(1	City/State and Zip	Code)	
For further informat	tion concerning t	this matter, please call:	
AL	DESA	at (40	de & Daytime Telephone Number)
(Nar	ne of Person)	. (Area Co	de & Daytime Telephone Number)
Enclosed is a check	for \$35.00 made	e payable to the Florida	Department of State.
Street Address: Amendment Section Division of Corporat Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	Mailing Address: Amendment Section Division of Corporation Post Office Box 6327 Tallahassee, FL 3231	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, <u>ALI</u>	DA WOUD	, hereby resign as VICE PRESIDENT
		(Title)
ofSAL	Name of Corp	
P970000669&	7 ,a co	orporation organized under the laws of the State of
TLOP WA	·	SUL PLANTS
	ALI DAG	Jano Andrews State of the State
_	(Signatur	e 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