## P97000108587

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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There 07/12/07--01035--021 \*\*35.00

## **COVER LETTER**

Division of Corporations
SUBJECT: Mrs. Mobility Inc. (Name of Corporation)  DOCUMENT NUMBER: P97000108587
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
Mrs. Mobility Inc. (Name of Firm/Company)
11163 Spring Hill Dr. (Address)
Spring Hill FL- 34408 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person)  at (352) 61e6-3607 (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

Amendment Section

TO:

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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

SECRETARY OF STATE
(All Ahlassee, Florida)

of Mrs. Mobility Inc.
(Name of Corporation)

P97000/08587

(Signature of resigning officer/directory)

## **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