P9800086208

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nar	me)
(D	ocument Number)	
Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	
1		!

Office Use Only



500060241245

10/07/05--01030--008 **35.00

OS OCI -7 MII: 46
SECRETARY OF STATE
TALLAHASSEE FLORING

5 35 mm 907 1.7 2005.



TRANSMITTAL LETTER

Amendment Section Division of Corporations Old World Renaissance, Inc. (Name of Corporation) P98000086208 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Steven A Sellers (Name of Person) Old World Renaissance, Inc. (Name of Firm/Company) 4100 NW 58th Lane (Address) Boca Raton, Fl. 33496 (City/State and Zip Code) For further information concerning this matter, please call: Steven Sellers 56 239-8468
(Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: **Street Address:** Amendment Section Division of Corporations Amendment Section Division of Corporations P.O. Box 6327 409 E. Gaines Street Tallahassee, FL 32314 Tallahassee, FL 32399

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

James A. Sharon	, hereby resign as_	President / Director (Title)
of Old World Renaissance, Inc.	ne of Corporation)	
P98000086208 (Document Number, if known)	, a corporation organized un	der the laws of the State of
Florida	(Signature of resigning officer/direc	tor)
	, , , , , , , , , , , , , , , , , , ,	SECRETARY (TALLAHASSEE

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

FILING FEE IS \$35.00

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