## P980000087834

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	,
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE STORY OF GCREDRATIONS

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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: P 98000087834					
(Name of Corporation)					
DOCUMENT NUMBER: P 98000087834					
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
QUDRATHULLA SIDDIQUI					
(Name of Person)					
FLORIDA STORES /NC (Name of Firm/Company)					
(Name of Firm/Company)					
15864 SW 137 1 Ave (Address)					
(Address)					
MIAMI FL 33177 (City/State and Zip Code)					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Quaratholla Siddlaul at (786) 261-Soco (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, <u>Habeebunisa Siddiqui</u>	, hereby resign as	Vice	PRESIDENT (Title)	_
of Florida Stores	f Corporation)			_,
P 980000 87834 (Document Number, if known)	, a corporation organized ur	nder the law	vs of the State of	
Florida	·			
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Hoseebus (Si)	gnature of resigning officer/direc	tor)		SECRET!
			OS OCT IL PAR	FOUNDORS
			*	ATION

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