## P98000096535

(Re	equestor's Name)	
	•	
(Ac	ldress)	
•	,	
(Ad	Idress)	
•	,	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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(Do	cument Number)	<u> </u>
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
AND SECRETARY OF STATE



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Dingan Inc. (Name of Corporation)
DOCUMENT NUMBER: P9300096535
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)
(Name of Firm/Company)
(Address) Kme Concourse, Ste. 200
Bay Harbor, FL. 331541 (City/State and Zip Code)
For further information concerning this matter, please call:
Grea Fishman at (305) 86.5-5718 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, /Nanu	Khiata	<u>∩</u> `, h	ereby resign as	Vice	President		
of	Din ran (Name o	Inc.				<b>,</b>	
P980009	6535 er, if known)	_, a corporati	on organized und	er the laws o	f the State of		
Florid	Λ	<b>.</b>					
_	Mau (Si	Hudu gnature of resig	gning officer/directo	r)	SEC TALL	05 %	
					ECRETARY OF STAT LLAHASSEE, FLOR	05 NOV -7	FILED
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	FI	LING FEE	19 935.00		<u>S</u> m	3	

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

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