

S83316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

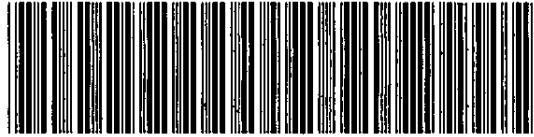
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600133331376

*Resignation
of officer*

07/25/08--01007--023 **35.00

2008 JUL 25 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*AKR
7/29/08*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STRUDERS N CREAM OF FLORIDA INC
(Name of Corporation)

DOCUMENT NUMBER: S82316

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William R Wing
(Name of Person)

(Name of Firm/Company)

7816 32ND ST EAST
(Address)

SARASOTA FL 34243
(City/State and Zip Code)

For further information concerning this matter, please call:

Joanne Matses EA at (941) 921-1210
(Name of Person) (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**

FILED

2008 JUL 25 PM 4:51

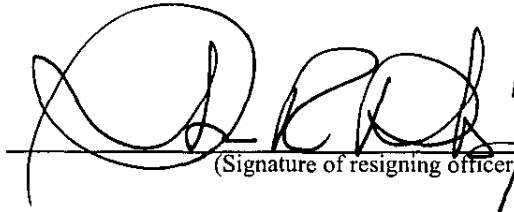
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, William R Wing, hereby resign as OFFICER / Director
(Title)

of STRUDELS 'N CREAM OF FLORIDA, INC
(Name of Corporation)

S83316, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

 PRES. 7/24/08
(Signature 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