

597590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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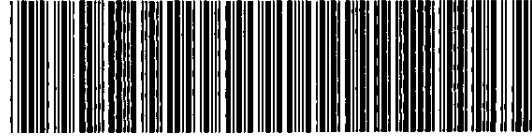
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

O. This

6/14/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SALDAN McKENZIE, INC.
(Name of Corporation)

DOCUMENT NUMBER: S97590

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

Please return all correspondence concerning this matter to the following:

Cheryl McKenzie
(Name of Person)

(Name of Firm/Company)

38 Dawson Road - Unit 83 (Box 39)
(Address)

Collingwood, Ontario L9Y 5B4
(City/State and Zip Code)

For further information concerning this matter, please call:

Cheryl McKenzie at (941) 587 3403
(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**

I, Cheryl McKenzie, hereby resign as D
(Title)

of Saldan McKenzie, Inc.
(Name of Corporation)

S97590, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

CLA McKen

(Signature of resigning officer/director)

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SECTION OF STATE
TALLAHASSEE, FLORIDA

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