

NO 2000004115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

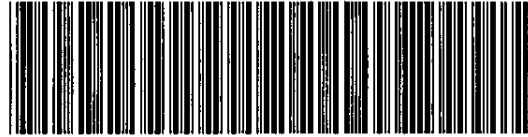
(Business Entity Name)

(Document Number)

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FEB 08 2016

K. WHITE

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SAFARI TODD Wildlife Productions  
(Name of Corporation)

**DOCUMENT NUMBER:** N 02000004115

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

Please return all correspondence concerning this matter to the following:

Michelle Olandese  
(Name of Person)

SAFARI TODD Wildlife Productions  
(Name of Firm/Company)

4983 Brook Rd  
(Address)

Kissimmee, FL 34758  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lynne Hawksworth at (407) 738-0523  
(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  
P.O. Box 6327  
Tallahassee, FL 32314

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

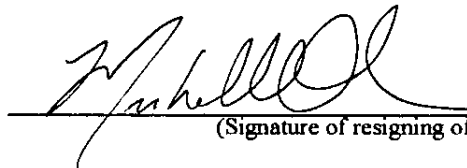
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Michelle Olardese, hereby resign as Chairman  
(Title)

of SAFARI TODD WILDLIFE PRODUCTIONS,  
(Name of Corporation)

NO2000004115, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA.

  
(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

**FILED**  
**16 FEB -5 PM 5:07**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**