

706019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

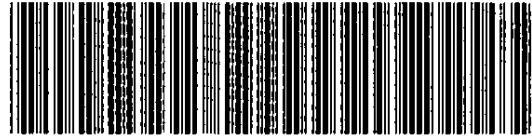
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signatures and initials*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Alcoholic Service Center *INC.*  
(Name of Corporation)

**DOCUMENT NUMBER:** 706019 (FEI/EIN # 592919095)

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

Please return all correspondence concerning this matter to the following:

*Bernard Graper*  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

*48 W 4th St*  
(Address)

*Jacksonville FLA 32206*  
(City/State and Zip Code)

For further information concerning this matter, please call:

*Bernard Graper* at *(904) 859 2926*  
(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

RECEIVED  
2010 JUL 27 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Bernard Graper, hereby resign as Board Member  
(Title)

of Alcoholic Service Center Inc.  
(Name of Corporation)

706019 (FEI/EIN) 5092919095, a corporation organized under the laws of the State of  
(Document Number, if known)

FLA

Bernard Graper  
(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  
10 JUL 23 PM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA