

P04000052363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

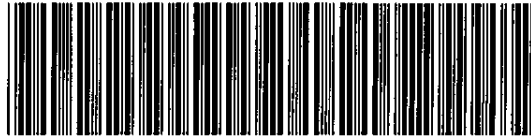
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TALLAHASSEE, FLORIDA

00220  
1-15-08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Jankowski & Associates, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P 04000052363

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

Please return all correspondence concerning this matter to the following:

John B. Jankowski  
(Name of Person)

Jankowski & Associates, Inc.  
(Name of Firm/Company)

1193 Enterprise Dr., Bldg A, Suite 6  
(Address)

Port Charlotte, FL 33953  
(City/State and Zip Code)

For further information concerning this matter, please call:

John B. Jankowski at ( 941 ) 815-8518  
(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

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TALLAHASSEE, FLORIDA

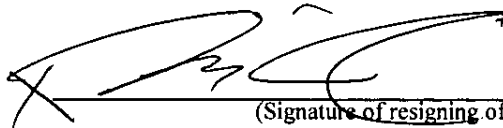
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Michael A. Jankowski, hereby resign as Secretary, Director  
(Title)

of Jankowski & Associates, Inc.,  
(Name of Corporation)

P 04000052363, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

  
(Signature of resigning officer/director)  
Michael A. Jankowski

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08 JAN 10 PM 3:23  
SECRETARY 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