Poso0006684/

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
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COVER LETTER

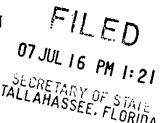
Amendment Section Division of Corporations

TO:

SUBJECT: SJZ Construction En	terprises, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: P050	00066841
The enclosed Officer/Director Resign	nation for a Corporation and fee are submitted for filing
Please return all correspondence con-	cerning this matter to the following:
Christopher Neal Johnson	
(Name of Perso	on)
(Name of Firm/Con	npany)
1637 Swan Terrace	
(Address)	
North Fort Myers, Florida 33903	
(City/State and Zip	Code)
For further information concerning the	his matter, please call:
Christopher Neal Johnson	at (239) 225-5228 (Area Code & Daytime Telephone Number)
(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	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

(»

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Christopher Neal Johns	on	, hereby resign as	Director	- OKIUZ
	- Hr - 17	, nereby resign as_	(Title)	···
SJZ Construction Enter	prises, Inc.			
	(Name of Corporati	on)		
P05000066841	a co rn oi	ration organized un	der the laws of the Sta	nte of
(Document Number, if know	n)	allon organized an		
FLORIDA	•			
	/	1		

(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