

PD60000082246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

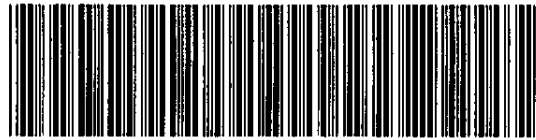
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Texti-Prints, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P06000082246

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

Please return all correspondence concerning this matter to the following:

Patricia A. McCormick

(Name of Person)

Texti-Prints, Inc.

(Name of Firm/Company)

434 Division Ave.

(Address)

Ormond Beach, Florida 32174

(City/State and Zip Code)

For further information concerning this matter, please call:

Jacqueline Ludlow

(Name of Person)

at (386) 615-7397

(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