## Po6000142259

(Re	equestor's Name)	
(Ad	dress)	
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(City/State/Zip/Phone #)		
PICK-UP	MAIT WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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2416 MAY 16 PM 1:54 SECRETARY OF STATE

MAY 1 9 2016 C. CARROTHERS

## TRÄNSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: Spectrum Signs and Graphics, Inc.  (Name of Corporation)  DOCUMENT NUMBER: P06000142259  The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following:
T' I OL'
Timothy Shippee
(Name of Person)
Hathaway & Reynolds, P.A.
(Name of Firm/Company)
50 A1A North, Suite 108
(Address)
Ponte Vedra Beach, FL 32082
(City/State and Zip Code)
For further information concerning this matter, please call:
Timothy Shippee at (904) 280-5526 (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.

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

Vice President and Treasurer
(Title)
Graphics, Inc.
poration)
orporation organized under the laws of the State of
7 16 Y 16
re 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