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TIMOTHY J. SLOAN, P.A.

ATTORNEY AND COUNSELOR AT LAW 427 MCKENZIE AVENUE POST OFFICE BOX 2327 PANAMA CITY, FLORIDA 32402-2327

TIMOTHY J. SLOAN ALSO MEMBER OF DISTRICT OF COLUMBIA AND MISSOURI BARS TELEPHONE (850) 769-2501 FACSIMILE (850) 769-0824

July 16, 2015

VIA FEDERAL EXPRESS

Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, Florida 32301

Re: VBA Design, Inc.

Gentlemen:

Enclosed please find an original Officer/Director Resignation for a Corporation ("Resignation"), in connection with the above referenced corporation, together with a check in the amount of \$35.00 to cover the cost of filing. Please file this Resignation at your earliest convenience.

Thank you for your assistance with this matter. If there are any questions, please do not hesitate to call collect.

Sincerely,

TIMOTHY J. SLOAN, P. A.

imothy J Sloan

TJS/mf Encl.

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: VBA DESIGN, INC. (Name of Corporation)
DOCUMENT NUMBER: P12000068778
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Timothy J. Sloan
(Name of Person)
Timothy J. Sloan, P.A.
(Name of Firm/Company)
427 McKenzie Avenue
(Address)
Panama City, FL 32401
(City/State and Zip Code)
For further information concerning this matter, please call:
Timothy J. Sloan (Name of Person) at (850) 769-2501 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L GEORGE B. COLLINS	, hereby resign as	Director/Secretary/Treasurer
7		(Title)
of VBA DESIGN, INC.		
(Name of Corpora	ition)	,
P12000068778 , a corp	oration organized ur	nder the laws of the State of
(Document Number, if known)	•	
FLORIDA		

FILING FEE IS \$35.00

signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314