

487333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500259796055

05/05/14--01031--006 \*\*35.00

FILED  
SECRETARY OF STATE  
14 MAY -5 AM 10:58  
OFFICE OF CORPORATIONS

OD/Res  
@ 5/14/14

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Poller and Jordan Advertising Agency, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** 487333

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

Please return all correspondence concerning this matter to the following:

Robert Poller

(Name of Person)

Poller and Jordan Advertising

(Name of Firm/Company)

373 N W Shoreview Drive

(Address)

Port St Lucie, FL 34986

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Poller

(Name of Person)

at ( 772 ) 343-7369

(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

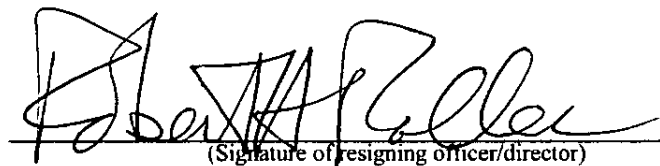
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Robert Poller, hereby resign as President  
(Title)

of Poller and Jordan Advertising Agency, INC.  
(Name of Corporation)

487333  
(Document Number, if known), a corporation organized under the laws of the State of

Florida

  
(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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY -5 AM 10:58