539341

(Red	questor's Name)	
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Certified Copies	Certificates	of Status
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Special Instructions to F	iling Officer:	
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SLUKETARY OF STATE FALLAHASSEE, FLORIDA

Officer Resign Ein Murphy 1/3/08

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: W.M. Kriston & Sons, Ir	nc
	(Name of Corporation)
DOCUMENT NUMBER: 5393	341
The enclosed Officer/Director Resignation	ion for a Corporation and fee are submitted for filing
Please return all correspondence concer	ning this matter to the following:
Gary A. Kriston	
(Name of Person)	
W.M. Kriston & Sons, Inc	,
(Name of Firm/Compa	ny)
1730 Dundee Road	
(Address)	
Winter Haven, FL 33884	
(City/State and Zip Co	de)
For further information concerning this	matter, please call:
Gary A. Kriston	at (863) 293-5379 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made page	yable to the Florida Department of State.
Amendment Section Arr Division of Corporations Di Clifton Building Po	ailing Address: mendment Section vision of Corporations est Office Box 6327 allahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Dawn M. Murphy	, hereby resign as President		
· · · · · · · · · · · · · · · · · · ·	(Title	:)	
of W.M. Kriston & Sons, Inc		,	
	of Corporation)	,	
539341 (Document Number, if known)	_, a corporation organized under the laws of the State of		
Florida	<u>_</u> .		
	Signature of resigning officer/director) FILLING FEE IS \$35.00	FILED 07 DEC 31 PM 2: 19 SEGRETARY OF STAFL TALLAHASSEE, FLORID.	

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

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