557230

(Re	questor's Name)			
(Ad	dress)			
——————————————————————————————————————	dress)			
(1.12	J. 500)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
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TRANSMITTAL LETTER

	Amendment Section Division of Corporations				
SURIF	JOHN GRAY REALTY, INC	,			
SODAE	SUBJECT: (Name of Corporation)				
DOCUN	MENT NUMBER: 557230	·			
The enc	losed Officer/Director Resignati	on for a Corporation and fee are submitted for filing.			
Please re	eturn all correspondence concer	ning this matter to the following:			
JOHN G	RAY				
	(Name of Person)				
JOHN GI	RAY REALTY, INC				
	(Name of Firm/Compa	ny)			
1493 RU	SH LN				
	(Address)				
FLEMIN	G ISLAND, FL 32003				
	(City/State and Zip Coo	de)			
For furth	ner information concerning this	matter, please call:			
JOHN GI	RAY	904 568-0346			
	(Name of Person)	at () (Area Code & Daytime Telephone Number)			
Enclosed	d is a check for \$35.00 made page	yable to the Florida Department of State.			
<u>N</u>	Mailing Address:	Street Address:			
	Amendment Section Amendment Section				
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	The Centre of Tallahassee			
7	Fallahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

JOHN C GRAY	PRESIDE	PRESIDENT		
I,	, hereby resign as	, hereby resign as(Title)		
		(Tide)		
JOHN GRAY REALTY, INC of				
	(Name of Corporation)			
557230	, a corporation organized under the l	aws of the State of		
(Document Number, if kno-	wn)	aws of the state of		
FLORIDA				
	·			
	(Signature of resigning) officer/director)	7020 HAY 11		
	·	P [[

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