

673487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

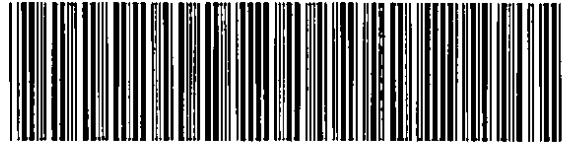
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

JQ 10/07/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MCGOVERN CONSTRUCTION CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: 673487

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

Please return all correspondence concerning this matter to the following:

Bernard W. McGovern

(Name of Person)

McGovern Construction Corporation

(Name of Firm/Company)

P.O. Box 500

(Address)

Summerfield Florida 34492-0500

(City/State and Zip Code)

For further information concerning this matter, please call:

Bernard W. McGovern

(Name of Person)

at (239) 671-2014

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

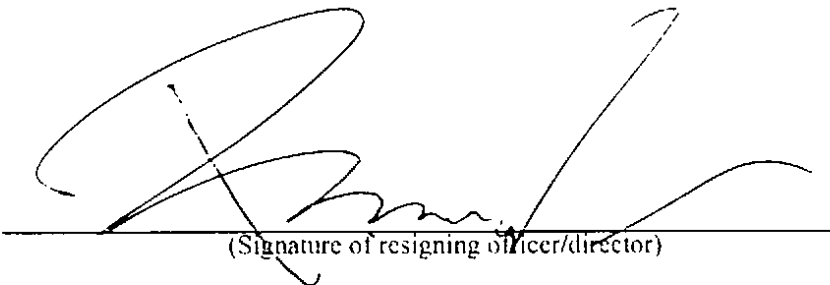
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Bernard F. McGovern, hereby resign as President / Director
(Title)

of McGovern Construction Corporation
(Name of Corporation)

673487, a corporation organized under the laws of the State of
(Document Number, if known)

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
2020 AUG 24 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FL