

676212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

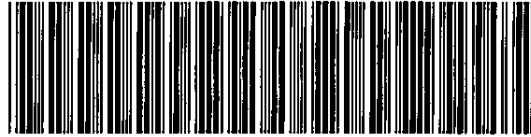
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

*On Rec by
2-12-07*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IRA GOLDBERG + SON, INC
(Name of Corporation)

DOCUMENT NUMBER: 676212

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

Please return all correspondence concerning this matter to the following:

WILLIAM D. HARPER

(Name of Person)

HARPER, PAXSON, WILLIAMS + WING

(Name of Firm/Company)

595 W. GRANADA BLVD STE I

(Address)

ORMOND BEACH FL 32174

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM D. HARPER

(Name of Person)

at (386) 677-6625

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, IRA GOLDBERG, hereby resign as PRESIDENT / DIRECTOR
(Title)

of IRA GOLDBERG + SON, INC
(Name of Corporation)

676212, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Ira Goldberg
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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