

G51894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

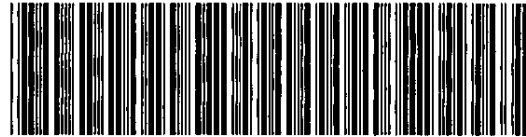
(Business Entity Name)

(Document Number)

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

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DEC 16 2013

R. WHITE

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13 DEC 11 PM 3:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Endcor, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** G51894

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

Please return all correspondence concerning this matter to the following:

**James A. Endres**

(Name of Person)

**Endcor, Inc.**

(Name of Firm/Company)

**1878 Springwood circle North**

(Address)

**Clearwater, fl 33763**

(City/State and Zip Code)

For further information concerning this matter, please call:

**James AS. Endres**

(Name of Person)

at ( **727** ) **733-1842**

(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, Kelly Endres, hereby resign as Director  
(Title)

of Endcor, Inc  
(Name of Corporation)

G51894, 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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## AFFIDAVIT

STATE OF FLORIDA

COUNTY OF ORANGE

I, Kelly Elizabeth Endres, being duly sworn according to law, deposes and attests under penalty of perjury the following statements:

1. I am over 18 years of age and competent enough to testify of my own knowledge of the facts stated herein.
2. All of the facts stated by me herein are true, correct and complete to the best of my knowledge and understanding.
3. I have never worked for, or acted on behalf of, Endcor, Inc in any position.
4. I have never received any paychecks or monies from Endcor, Inc.
5. I have never been listed on any bank accounts associated with Endcor, Inc.

(Signature of Affiant): 

(Printed Name of Affiant): Kelly Elizabeth Endres

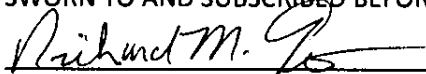
(Address of Affiant): 1130 Grayson Drive, Orlando, FL 32825

### NOTARY CERTIFICATION

STATE OF FLORIDA

COUNTY OF ORANGE

SWORN TO AND SUBSCRIBED BEFORE ME THIS 10<sup>th</sup> DAY OF December, 2008.



NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES: 6/16/14

(PLACE NOTARY SEAL HERE)

