(Requ	estor's Name)	
(Addre	ess)	
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Special Instructions to Fili	ng Officer:	
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Office Resign Cin murphy 2/1/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: R. Marshall Cones, Inc. (Name of Corporation) DOCUMENT NUMBER: C 89068
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Please return an correspondence concerning this matter to the following:
Marshall (Name of Person)
R. Mcushall Jones Inc (Name of Firm/Company)
470 Columbia Drive #E-100
West Palm Beach, Fl 33409 (City/State and Zip Code)
For further information concerning this matter, please call:
Marshall (Name of Person) at (561) 712-9799 (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

Post Office Box 6327 Tallahassee, FL 32314

Street Address:
Amendment Section

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, June Jones, hereby resign as Ui	ce Prosident
of R. Marshall Jones, Inc. (Name of Gorporation)	
C 89068 , a corporation organized under the (Document Number, if known)	e laws of the State of
florida.	•
	1
	JAN BLÜRET ALLAH
(Signature of resigning officer/director)	JAN 25 PM RETARY OF AHASSEE, F
	T LISTE FLORIDA
	D O

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