X88401

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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APR 2 6 2016 C. CARROTHERS

TRANSMITTAL LETTER

SUBJECT: Business Computer Consultants of Ocala, Inc.
(Name of Corporation)
DOCUMENT NUMBER: K88401
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Daniel T. Burgess
(Name of Person)
Business Computer Consultants of Ocala, Inc. (Name of Firm/Company)
3930 N.E. 8 Street
Ocala, FL 34470 (City/State and Zip Code)
For further information concerning this matter, please call:
Daniel T. Burgess at (352)629-6168 (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 2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{ı.} Suzanne E. Burges	hereby resign as D/S/T (Title)	
	r Consultants of Ocala, Inc.	
(Name K88401 (Document Number, if known)	of Corporation)	
Florida	·	
	Signature of resigning officer/director)	
	Signature of resigning officer/director)	1
]	FILING FEE IS \$35.00	- 4

Amendment Section Division of Corporations P.O. Box 6327

Make checks payable to Florida Department of State and mail to:

Tallahassee, Florida 32314