

L26423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

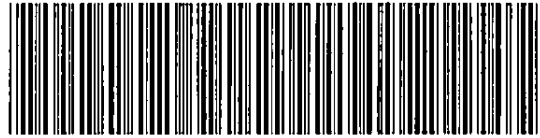
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Master Screens, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** L26423  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Dale Burraston

\_\_\_\_\_  
(Name of Person)

Master Screens, Inc.

\_\_\_\_\_  
(Name of Firm/Company)

7117Atlantic Blvd.

\_\_\_\_\_  
(Address)

Jacksonville, FL 32211

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy Shippee

904

280-5526

\_\_\_\_\_  
(Name of Person)

at (\_\_\_\_\_) \_\_\_\_\_  
(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

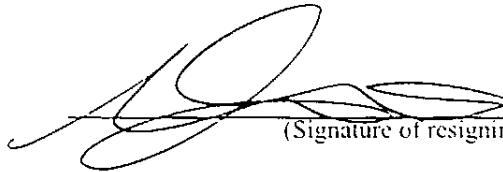
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TALLAHASSEE  
FLORIDA

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Ashton V. Newsome, hereby resign as Secretary  
(Title)

of Master Screens, Inc.  
(Name of Corporation)

L26423, 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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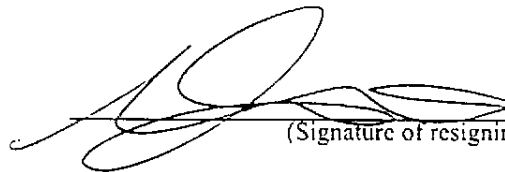
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TALLAHASSEE, FLORIDA