## 64.3105

(Re	equestor's Name)	.,
(Ac	ldress)	
(		
(Address)		
(City/State/Zip/Phone #)		
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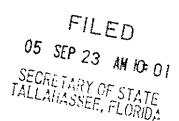
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: SERVPRO OF CENTS	RAL FLORIDA TRAINERSHIP, INC.
	(Name of Corporation)
DOCUMENT NUMBER: L43105	
The enclosed Officer/Director Resigna	tion for a Corporation and fee are submitted for filing
Please return all correspondence conce	rning this matter to the following:
SARA S. RALEY	
(Name of Person)	, , , , , , , , , , , , , , , , , , , ,
SERVPRO OF CENTRAL FL TRA	•
(Name of Firm/Comp	any)
1251 SEMINOLA BLVD., SUITE 2	200
(Address)	
CASSELBERRY, FLORIDA 3270	
(City/State and Zip C	ode)
For further information concerning this	s matter, please call:
SARA S. RALEY	at ( 407 ) 740-0414 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made p	ayable to the Florida Department of State.
Amendment Section A Division of Corporations E Clifton Building	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Fallahassee, FL 32314



## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



WILLIAM H. RALEY, JR.	, hereby resign as PRESIDENT	
7	(Title)	
$_{ m of}$ SERVPRO OF CENTRAL FLO	ORIDA TRAINERSHIP, INC.	
(Name	e of Corporation)	
(Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA		
	•	
Don H- RA	(Signature of resigning officer/director)	
	(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