

M 67121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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(Business Entity Name)

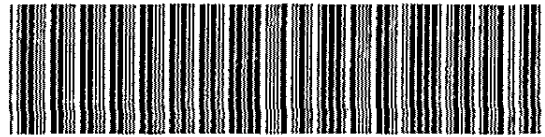
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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DRUDY & ASSOCIATES INC
(Name of Corporation)

DOCUMENT NUMBER: M 67121

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

Please return all correspondence concerning this matter to the following:

DENISE DRUDY
(Name of Person)

(Name of Firm/Company)

P.O. Box 17879
(Address)

TAMPA FL 33682
(City/State and Zip Code)

For further information concerning this matter, please call:

DENISE DRUDY at (813) 877-4595
(Name of Person) (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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DENISE DRUDY, hereby resign as DIRECTOR
(Title)

of DRUDY & ASSOCIATES, INC.
(Name of Corporation)

M 67121, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

FILED
05 JAN -6 PM 1:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Denise Drudy
(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