

N03000006775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

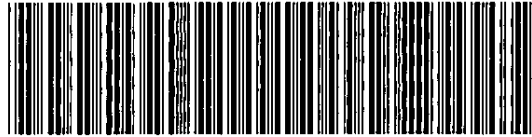
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Construction Licensing Officials Association of Florida, Inc.

(Name of Corporation)

DOCUMENT NUMBER: N03000006775

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

Please return all correspondence concerning this matter to the following:

William F. Brod, Jr., Executive Director

(Name of Person)

Construction Licensing Officials Association of Florid

(Name of Firm/Company)

1030 East Lafayette Street, Suite 1

(Address)

Tallahassee, Florida 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

William F. Brod Jr.

(Name of Person)

at (850) 567-7790
(Area Code & Daytime Telephone Number)

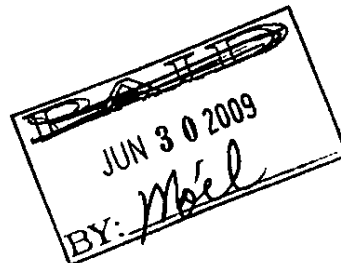
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DEBBIE HARRISON, hereby resign as TREASURER
(Title)

of Construction Licensing Officials Association of Florida, Inc.
(Name of Corporation)

N03000006775, a corporation organized under the laws of the State of
(Document Number, if known)

Debbie Harrison

Debbie Harrison
(Signature of resigning officer/director)

COPY
*To be Filed
of Corp Records*

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TALLAHASSEE FLORIDA

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

PAID
JUN 30 2009
BY: *Mail*