## N0600010533

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	<b>⊋</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE

off. Resign.

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OCT - 5 2010

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUB.	BJECT: Philip A. Bryant Melanoma I	Foundation, Inc
2012		(Name of Corporation)
DOC	OCUMENT NUMBER: N060000108	533
The e	e enclosed Officer/Director Resignation f	for a Corporation and fee are submitted for filing.
Pleas	ase return all correspondence concerning	this matter to the following:
Kev	evin M. Burkart	
	(Name of Person)	
Bur	urkart & Company, PA	
	(Name of Firm/Company)	
530	301 Central Avenue	
	(Address)	
St.	t. Petersburg, FL 33710	
	(City/State and Zip Code)	
For f	r further information concerning this matt	er, please call:
Kev	evin M. Burkart	at ( 727 ) 896-6269 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Encl	closed is a check for \$35.00 made payable	e to the Florida Department of State.
Amer Divis Clifto 2661	nendment Section Amend vision of Corporations Division fton Building Post O	g Address: Idment Section on of Corporations Iffice Box 6327 assee, FL 32314

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, Kevin W. Burkart	, hereby resign as Treasurer (Title)
of Philip A. Bryant Melanom	a Foundation, Inc. Name of Corporation)
(Document Number, if known), a corporation organized under the laws of the State of	
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