N/1000010546

(Re	equestor's Name)	
(Address)		
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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m/pw leson

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FOIASC POST #1003 INC (Name of Corporation)
DOCUMENT NUMBER: N 11000010546
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Name of Person)
THE AUBI- FUIASC POST # 1003 INC (Name of Firm/Company)
801 S. STATE ST (Address)
BUNNELL, BC 32110 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (717) 424.5557 (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
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

DIVISION OF CORPORATIONS

12 NOV -9 PM 3: 22

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, DAWNS.CO	, hereby resign as Vice President (Title)
of FOIASC POST & (Name	of Corporation),
N11000010546 (Document Number, if known)	_, a corporation organized under the laws of the State of
FLORIDA	_·

(Signature of resigning officer/dilector

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