

P0000000 4603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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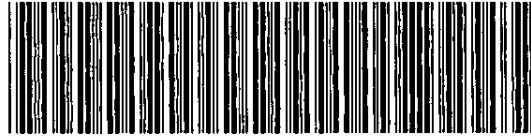
(Business Entity Name)

(Document Number)

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SEP 13 2013
T. LEMIEUX
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
4 PM 1:03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SHOEMAKER & ASSOCIATES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P00000004603

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

Please return all correspondence concerning this matter to the following:

Timothy G. Hayes

(Name of Person)

Law Offices of Timothy G. Hayes, P.A.

(Name of Firm/Company)

21859 State Road 54, Suite 200

(Address)

Lutz, FL 33549

(City/State and Zip Code)

For further information concerning this matter, please call:

Debrah Mayworth

(Name of Person)

at (813) 949-6525

(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
2661 Executive Center Circle
Tallahassee, FL 32301

Please return copy to our office)

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SALLY SHOEMAKER, hereby resign as OFFICER/DIRECTOR
(Title)

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

P00000004603, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

APPROVED
AND
FILED
13 SEP -4 PM 1:03
SECRETARY OF STATE
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

COPY

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Tallahassee, Florida 32314