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COVER LETTER

SUBJECT: On The Spot Paint Renair, Inc. (Name of Colporation)
DOCUMENT NUMBER: <u>POOO 00 0 22500</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gary W. Burge Jr. (Name of Person)
On The Spot Paint Repair, Inc. (Name of Firm/Company)
P.O. Box 568/ (Address)
Hudson FL 34674-5681 (City/State and Zip Code)
For further information concerning this matter, please call:
Jennifer Burge at (727) 389-6110 (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
Post Office Box 6327

Tallahassee, FL 32314

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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Jennifer Burge	, hereby resign as_	Direct	(Title)	
of On The Spot Pain	- Repair, I	nc.		,
(Document Number, if known)	corporation organized un	der the laws of	f the State of	·
Florida.				
Signal	Buge ure of resigning efficer/direct	or)		SECHETARY OF STATE STORE OF CORPORATIONS

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