P000000 6/292

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	TIAW [MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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03/21/05--01019--011 **35.00

05 MAR 21 PM 4: 14

10/0 Resign.
03/25/05

TRANSMITTAL LETTER

SUBJECT: Laidles & Paught of Tacksonville Inc. (Name of Corporation)
DOCUMENT NUMBER: POOCOGG 61292
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Since Ray Party (Name of Person)
Laidler & Pough of Tacksonville Tuc.
355 MONUMENT Rd. # 22F (Address)
Tacksovuille Fl 32225 (City/State and Zip Code)
For further information concerning this matter, please call:
Sincer 22 Paro H at (904) 726-5770 (Name of Person) (Area Code & Daytime Telephone Number)

Tallahassee, FL 32314

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

Amendment Section Division of Corporations

TO:

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Since Rad Pough , hereby resign as Vice President
of Laidler & Paug H of Tacksonville Inc. (Name of Corporation)
POCOCOO 61292 , a corporation organized under the laws of the State of (Document Number, if known)
- 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 05 MAR 21 PM 4: 14