PD000083826

(Req	uestor's Name)	<u></u>
(Addı	ress)	
(Addi	ess)	
(City/	State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Doci	ument Number)	
Certified Copies Certificates of Status		
Special Instructions to Fi	iling Officer:	

Office Use Only

00 D/Res 00, 5, 19, 04



300074068193

US/12/06-01032-005 ##70.00

OG MAY 12 AM 10: 00

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Short Call Isc (Name of Corporation)
DOCUMENT NUMBER: T COUNTY S SOLO
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gay Toney (Name of Person)
Short Call Isc (Name of Firm/Company)
5675 Hwy 90 (Address)
milton florida 32583 (City/State and Zip Code)
For further information concerning this matter, please call:
Gary Tomes at (850) 981-9327 (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

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ı, <u>ScoH</u>	Toney, hereby resign as C.F.O. (Title)	
of Short	(Name of Corporation)	,
Poolooo S (Document Number, if	a corporation organized under the laws of the State	of
-Floria	<u>a</u> .	

(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