

PO1000012348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

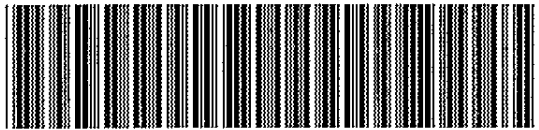
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____ Stillwell & Coleman Inc.
(Name of Corporation)

DOCUMENT NUMBER: P 01000012348

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

Please return all correspondence concerning this matter to the following:

Thomas M. Stillwell, III
(Name of Person)

Stillwell and Coleman Inc.
(Name of Firm/Company)

P.O. Box 338
(Address)

East Palatka, Fla. 32931
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas M. Stillwell, III at (386) 328-4749
(Name of Person) (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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Thomas M. Stilwell, III, hereby resign as ~~vice~~ President
(Title)

of Stilwell & Coleman Inc.
(Name of Corporation)

PO 1000012348, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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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