

P010000016942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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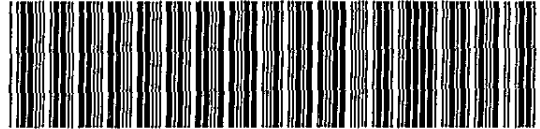
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: CAMPUS LODGE OF ATHENS, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P01000016942

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

Please return all correspondence concerning this matter to the following:

Frank Silcox

(Name of Person)

Campus Lodge of Athens, Inc.

(Name of Firm/Company)

100 S. Ashley Drive, Suite 1270

(Address)

Tampa, FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Frank Silcox

(Name of Person)

at ( 813 ) 209-0004

(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**

FILED

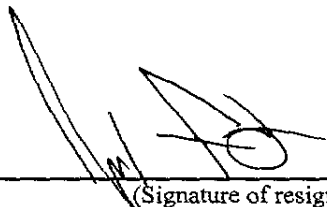
04 SEP -3 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, JASON L. FORT, hereby resign as DIR., PRES. SEC. TREAS.  
(Title)

of CAMPUS LODGE OF ATHENS, INC  
(Name of Corporation)

P01000016942, 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