

PO/00008059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

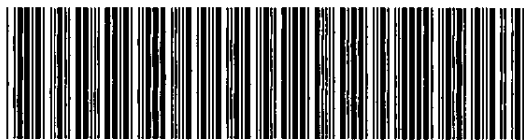
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1-9-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EXACT MASONARY CONSTRUCTION, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000018059

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

Please return all correspondence concerning this matter to the following:

FARES AL-MADI

(Name of Person)

EXACT MASONARY CONSTRUCTION, INC.

(Name of Firm/Company)

750 E SAMPLE RD, BUILD 1 BAY 1

(Address)

POMPANO BEACH FL 33064

(City/State and Zip Code)

For further information concerning this matter, please call:

FARES AL-MADI

(Name of Person)

at (954) 696-5293

(Area Code & Daytime Telephone Number)

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

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

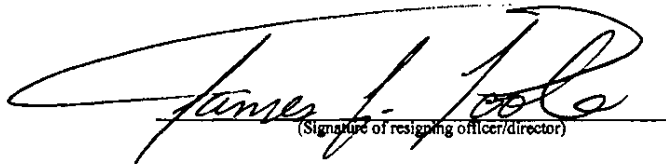
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JAMES F. POOLE, hereby resign as P.T.D
(Title)

of EXACT MASONARY CONSTRUCTION, INC.
(Name of Corporation)

P01000018059, 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA