

P01000090618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

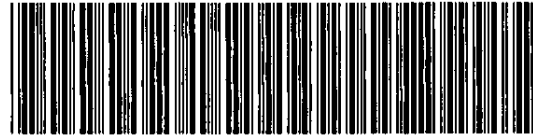
(Business Entity Name)

(Document Number)

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12 JUN 11 PM 3:05  
TALLAHASSEE, FLORIDA

JUN 13 2012  
C. MUSTAIN

*Handwritten signature*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Wallace and sons constrution Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000090618

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

Please return all correspondence concerning this matter to the following:

donna wallace

(Name of Person)

wallace and sonsc constr inc

(Name of Firm/Company)

po box 91

(Address)

altha fl 32421

(City/State and Zip Code)

For further information concerning this matter, please call:

~~762~~ Donna Wallace  
(Name of Person)

at ( 850 ) 762 8185  
(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, Donna Wallace, hereby resign as Treasurer (Title)  
of Wallace & sons construction, Inc. (Name of Corporation)  
p01000090618, a corporation organized under the laws of the State  
(Document Number, if known)  
florida

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TALLAHASSEE FLORIDA

Donna Wallace  
(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