

PO1000104885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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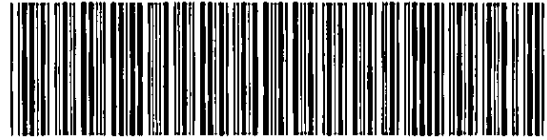
(Business Entity Name)

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OID-Resign

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SFG Imaging Consultants, Inc.

(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Shelley R Graham

(Name of Person)

SFG Imaging Consultants, Inc.

(Name of Firm/Company)

6060 Gufport Blvd South

(Address)

Gulfport, Florida 33707

(City/State and Zip Code)

For further information concerning this matter, please call:

Scott F Graham

(Name of Person)

at (727) 644-9012

(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Shelley R Graham, hereby resign as officer D
(Title)

of SFG Imaging Consultants, inc.
(Name of Corporation)

P01000104885, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Shelley R Graham
(Signature of resigning officer/director)

FILED
18 DEC 10 PM 2:45
OFFICE OF THE
CLERK OF THE
SUPREME COURT
OF THE STATE OF FLORIDA

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