

P01000113065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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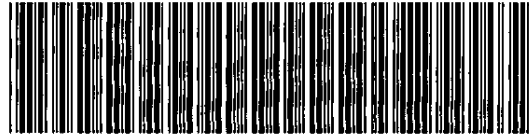
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Charles J. O'Connell, Certified General Contractor
(Name of Corporation)

DOCUMENT NUMBER: PO1000113065

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Mary L. O'Connell
(Name of Person)

Charles J. O'Connell, Certified General Contractor, II
(Name of Firm/Company)

1824 NE 7th Place
(Address)

Cape Coral, FL 33909
(City/State and Zip Code)

For further information concerning this matter, please call:

Mary L. O'Connell at (239) 574-8685
(Name of Person) (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, Mary L. O'Connell, hereby resign as Vice-President
(Title)

of Charles J. O'Connell, Certified General Contractor, Inc.
(Name of Corporation)

PO1000113065, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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TALLAHASSEE, 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