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TALLAHASSEE, FLORID

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COVER LETTER²

Amendment Section Division of Corporations

TO:

STIPLECT Barry Williams Cons	s. INC.
SUBJECT: Dainy Williams Cons	(Name of Corporation)
DOCUMENT NUMBER: P020	000047031
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing.
Please return all correspondence co	ncerning this matter to the following:
Barry Williams	
(Name of Pers	wom):
Barry Williams Cons. INC.	
(Name of Firm/Co	impany))
1125 mairi ct.	
(Address)	
kiss. fl. 34744	
(City/State and Zip	p Codle)
For further information concerning	this matter, please call:
barry williams	at (321) 624 0748
(Name of Person)	at (321) 624 0748 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FOR A CORPORATION

OF AUG 28 PM 12: 20

Troy Vantassel

Troy Williams: Construction Inc

(Name of Comporation)

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(Document Number, if known)

Fil.

Twoy Vantassel

OFFICER / DIRECTOR RESIGNATION

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