

PO2000047031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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9/13/07  
DO

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** barry williams cons. inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** p02000047031

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

Please return all correspondence concerning this matter to the following:

barry williams  
(Name of Person)

barry williams cons. inc.  
(Name of Firm/Company)

1125 maini ct.  
(Address)

kiss. fl. 34744  
(City/State and Zip Code)

For further information concerning this matter, please call:

barry williams at ( 321 ) 624 0748  
(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, Jason Bay, hereby resign as v.p.  
(Title)

of barry williams cons. inc.  
(Name of Corporation)

p02000047031, a corporation organized under the laws of the State of  
(Document Number, if known)

florida

Jason Bay  
(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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**TALLAHASSEE FLORIDA**