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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	es of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALL AHASSEF, FLORIO.

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S. Coullette MAY 2 8 2008

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: LCFP Inc.	
	(Name of Corporation)
DOCUMENT NUMBER: P020000	53550
The enclosed Officer/Director Resignation	on for a Corporation and fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Robert B. Henegar	
(Name of Person)	
LCFP Inc.	
(Name of Firm/Compan	y)
12645 New Brittany Blvd., Building	# 15
(Address)	
Ft. Myers, FL 33907	
(City/State and Zip Cod	e)
For further information concerning this n	natter, please call:
Robert B. Henegar	at (239) 936-4585 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made pay	able to the Florida Department of State.
Amendment Section Am Division of Corporations Div Clifton Building Pos	iling Address: endment Section ision of Corporations t Office Box 6327 lahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Angel O. Pietri	hereby resign as_	Director
,	, , <i>g</i>	(Title)
of LCFP Inc.		
	ne of Corporation)	,
P02000053550	, a corporation organized un	der the laws of the State of
(Document Number, if known)		
Florida		

(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