P02000054273

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| | | | | |
| (Address) | | | | |
| | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| (200),000 2,000, 100,000, | | | | |
| (Document Number) | | | | |
| (Document Number) | | | | |
| Codification of Status | | | | |
| Certified Copies Certificates of Status | | | | |
| | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| J. HORNE | | | | |
| | | | | |
| JAN 1 7 2024 | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



300420229023

12/15/23--01009--025 **35.00



TRANSMITTAL LETTER

| Division of Corporations |
|---|
| SUBJECT: Don Duchess Roofing Sytems, Inc |
| DOCUMENT NUMBER: PO2 0000 54 273 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Cory R. Beach (Name of Person) |
| Don Duchess Roofing System, Inc. (Name of Firm/Company) |
| 1886 North Hercules Ave Ste. A |
| Clear Water Fl. 33,765 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Cory Beach at (727) 748-2252 (Area Code & Daytime Telephone Number) |

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. Cory | Beach | , hereby resign as_D | irector (Title) |
|---------|-----------------|---------------------------------|-----------------|
| of Don | Duchess | Roofiny | Systems, Inc |
| | 2511777 | rporation organized unde | |
| Florida | · | | |
| | | | 10/27/23 |
| | - Com (Signatur | c 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