## P02000087870

(Red	juestor's Name)	
(Add	Iress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	filing Officer:	

Office Use Only



300129928293

05/22/08--01015--020 \*\*35.00





## **COVER LETTER**

Division of Corporations
SUBJECT: Empire Moude Deographic Name of Corporation)  DOCUMENT NUMBER: P0200087870
DOCUMENT NUMBER: 7 0 0000 6 76 70
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Marie of Person)  Empire Marble & Cill  (Name of Firm/Company)  14231 Jetpor + Loop #16  H. Mylvs Pl. 33913
(City/State and Zip Code)
For further information concerning this matter, please call:
Marie of Person) at (239) 235-4014 (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Cally Say, hereby resign as (The	le)	- Tre	i-/ asuru
of Empure Marker Dlagn C (Name of Corporation)	Osp	· '	
(Document Number, if known) a corporation organized under the laws of the	State of		
- Florida.			
15			
(Signature of resigning officer/director)	Zie E	*	
		FINE MAY 22	
FILING FEE IS \$35.00		2 M 0	

Make checks payable to Florida Department of State and mail to:

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