

PD2000096885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

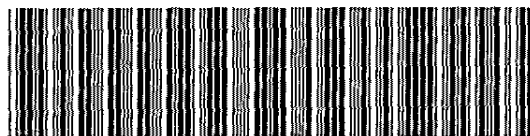
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100041303231

09/24/04--01081--003 **35.00

FILED
04 SEP 24 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CD/Res
9.30.04
Ta

FILED
04 SEP 24 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRETT JACOBSEN INC

(Name of Corporation)

DOCUMENT NUMBER: P02000096885

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

Please return all correspondence concerning this matter to the following:

BRETT JACOBSEN

(Name of Person)

BRETT JACOBSEN INC

(Name of Firm/Company)

1944 MORRILL ST

(Address)

SARASOTA FL 34236

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH E ROCKLEIN, III

(Name of Person)

at (941) 366-3600

(Area Code & Daytime Telephone Number)

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

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

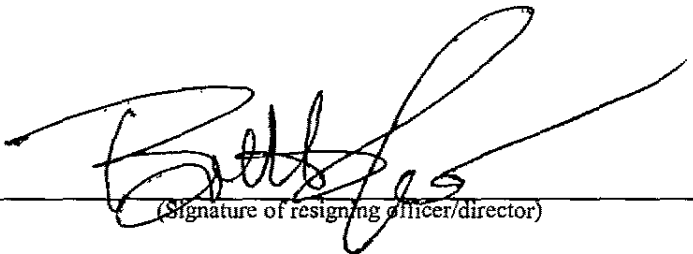
FILED
04 SEP 24 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, LANCE JACOBSEN, hereby resign as SECRETARY
(Title)

of BRETT JACOBSEN, INC.
(Name of Corporation)

P02000096885, a corporation organized under 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