

PO2000/13/28

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

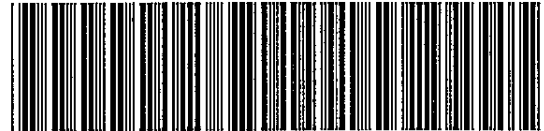
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: J+S Soffit + Fascia, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P02000113128

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

Please return all correspondence concerning this matter to the following:

Joseph R. Galluzzi  
(Name of Person)

J+S Soffit + Fascia, Inc.  
(Name of Firm/Company)

1856 Western Road  
(Address)

Soc. Daytona FL 32119-1934  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lauren Baggerson at ( 386 ) 258-8789  
(Name of Person) (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**

03 OCT 17 AM 9:58

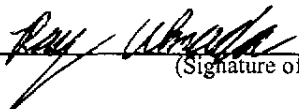
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Raymond Almada, hereby resign as Director  
(Title)

of J+S Soffit + Fascia, Inc.  
(Name of Corporation)

PO2000113128, 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