

PO20000134983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

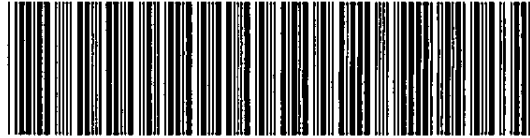
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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*Resignation
of officer*

12/23/15--01008--030 **35.00

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15 DEC 23 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 31 2015
A RAMSEY

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JENSEN & MAWMAN, INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000134983

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

Please return all correspondence concerning this matter to the following:

SHELLY J. MOORE

(Name of Person)

JENSEN & MAWMAN

(Name of Firm/Company)

803 NORTH THIRD STREET

(Address)

JACKSONVILLE BEACH, FL 32250

(City/State and Zip Code)

For further information concerning this matter, please call:

DAN ARMSTRONG, ESQ. at **904 280.0058**

(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION FILED**

15 DEC 23 PM 2:19

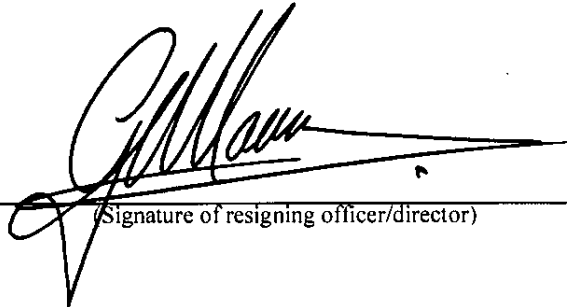
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIRECTOR, VP, AND SECRETARY

I, GRAHAM MAWMAN, hereby resign as _____
(Title)

of JENSEN & MAWMAN, INC.
(Name of Corporation)

P02000134983, 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