## P03000016043

(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



400048998584



H3/30/05--01022--011 \*\*70.00

0/0 resig.

1/2

## TRANSMITTAL LETTER

SUBJECT: The rest General Homes Fulc.

(Name of Corporation)

DOCUMENT NUMBER: Po 3000 16003

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

MARSEN LYND WOMEN (Name of Person)

The way Lynd Women (Name of Person)

LESIGN COMMENT OF MARSE FULC.

(Name of Firm/Company)

A65/6 Green Willow 7000

(Address)

Wesley City/State and Zip Code)

For further information concerning this matter, please call:

Lynd Women of Person)

at (S13) 523-1533

(Name of Person)

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

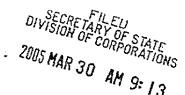
Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



1, Many Cockill	, hereby resign as	(Title)
of The much (Name of	Corporation)	luce.
Posolo 1 60 43 (Document Number, if known)	, a corporation organized under the	laws of the State of
Florida		
:		
Morey	gnature 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