

PO3D000017279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

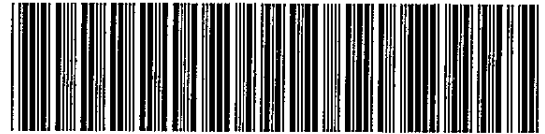
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Logical Reef Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 602338900359 PD3000017279

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

Please return all correspondence concerning this matter to the following:

Larry B. Kile Jr.  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

430 Court St.  
(Address)

Melbourne, FL 32901  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stacey Kile at (321) 821-1535  
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

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

I, Larry B. Kile Jr., hereby resign as President  
(Title)

of Logical Reef Inc.  
(Name of Corporation)

(Document Number, if known) \_\_\_\_\_, a corporation organized under the laws of the State of \_\_\_\_\_

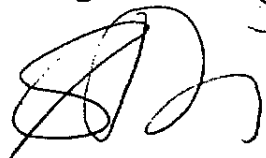
FLORIDA

(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

State of Va  
County of Breckin  
  
Notary.

