## P03000067086

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: COTHERN & CO., INC.
(Name of Corporation)
DOCUMENT NUMBER: P03000067086
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
STEVEN K. JONAS, ESQ.
(Name of Person)
STEVEN K. JONAS, P.A.
(Name of Firm/Company)
4914 STATE ROAD 54
(Address)
NEW PORT RICHEY, FL 34652
(City/State and Zip Code)
For further information concerning this matter, please call:
STEVEN K. JONAS, ESQ. at (727) 846-6945  (Name of Person) (Area Code & Daytime Telephone Number)
(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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

TALLAHASSER FARY OF STATE

PRESIDENT / DIRECTOR: FLORID,

(Title)

COTHERN & CO., INC.

(Name of Corporation)

P03000067086

(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