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TALLAHASSEF FIREIR

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COVER LETTER

Division of Corporations
SUBJECT: ANCIENT CITY BUILDING AND NESTORATION, INC. (Name of Corporation) DOCUMENT NUMBER: PO 30000 67977
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
EOWARD S. MAIN (Name of Person) ANCIENT CITY BUILDING & RESTORATION, INC (Name of Firm/Company)
7675 VOUBS ROAD (Address)
ST. AUGUSTINE, FL, 32086 (City/State and Zip Code)
For further information concerning this matter, please call:
EDWARD 5. MAIN at (404) 794-0500 (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

Amendment Section

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, GREGON	RY M. WRI	SBER4	, hereby resign a	S VILE PI	(Title)	
of ANCIENT	GTY BUNDA	W 6 ANU	RESTORATION	en, INC	<u> </u>	······································
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FLORIOM	ý	·				
	1/10	(Signature o	of resigning officer/dir	ector)	U8 JAN -7 PH 1:06 SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED

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

FILING FEE IS \$35.00

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