

PD3000103212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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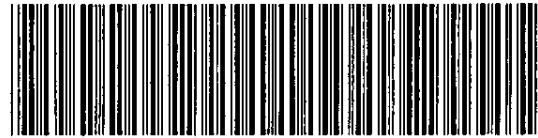
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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C.L.  
5-6-15

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brigitte Heindl Consulting, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000103212

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

Please return all correspondence concerning this matter to the following:

**Brigitte Heindl**

(Name of Person)

**Brigitte Heindl Consulting, Inc.**

(Name of Firm/Company)

**2422 EL DORADO PKWY W**

(Address)

**CAPE CORAL, FL 33914**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Brigitte Heindl**

(Name of Person)

at ( **239** ) **540-3485**

(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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 APR 28 AM 9:20

I, Friedrich Heindl, hereby resign as Director  
(Title)

of Brigitte Heindl Consulting, Inc.  
(Name of Corporation)

P03000103212, 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