

PO3000106425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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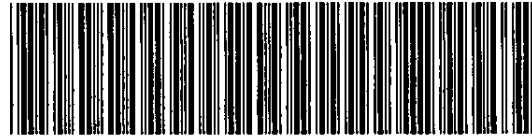
(Business Entity Name)

(Document Number)

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R. WHITE

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** J.L. LEAL DRYWALL, CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000106425

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

Please return all correspondence concerning this matter to the following:

**JOSE LEAL**

(Name of Person)

**J.L. LEAL DRYWALL CORP**

(Name of Firm/Company)

**1324 SEVEN SPRINGS BLVD #318**

(Address)

**NEW PORT RICHEY, FL. 34655**

(City/State and Zip Code)

For further information concerning this matter, please call:

**JOSE LEAL**

(Name of Person)

at ( **727** ) **938-4040**

(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**

I, DALE T. PARSONS, hereby resign as TREASURER  
(Title)

of J. L. LEAL DRYWALL, CORP  
(Name of Corporation)

P03000106425, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

*Dale T. Parsons*  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**FILED**  
**16 MAR -3 PM 8:56**  
**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