

PO3000121239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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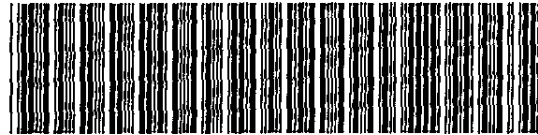
(Business Entity Name)

(Document Number)

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*J.H. Resign
T. Lewis*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 SEP 21 PM 12:37

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Triple A Construction of North Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P03000121239

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

Please return all correspondence concerning this matter to the following:

Archie Alan Alligood
(Name of Person)

Triple A Construction of North Florida, Inc.
(Name of Firm/Company)

19606 NW 202 Street
(Address)

High Springs, FL 32643
(City/State and Zip Code)

For further information concerning this matter, please call:

Archie Alan Alligood at (386) 454-4200
(Name of Person) (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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
05 SEP 21 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MARVIN Andrew Alligood, hereby resign as Secretary/Treasurer
(Title)

of TRIPLE A Construction of North Florida, Inc.
(Name of Corporation)

PO9000121239, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Marvin Andrew Alligood
(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