

PO3000152-441

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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M. KASIN

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** STRAEFFER INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P03000152441

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

Please return all correspondence concerning this matter to the following:

Graeme Straeffer

(Name of Person)

STRAEFFER INC.

(Name of Firm/Company)

1104 E. LaRua St

(Address)

Pensacola, FL 32501

(City/State and Zip Code)

For further information concerning this matter, please call:

Graeme Straeffer

(Name of Person)

at ( 850 ) 221-8270

(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

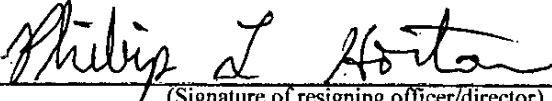
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Phillip L. Horton, hereby resign as Vice-President  
(Title)

of STRAEFFER INC.  
(Name of Corporation)

P03000152441, 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

**FILED**  
**06 AUG -9 PM 2:44**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**