PO400003283

(Re	equestor's Name)	
(Address)		
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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08/07/15--01015--012 **35.00

resignation.



AUG 1 0 2015 A RAMSEY

TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations** ERS.Construction Inc. SUBJECT: (Name of Corporation) **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Earl R. Starkey (Name of Person) ERS. Construction Inc. (Name of Firm/Company) 5040 Maple Glen Pl. (Address) Sanford, Fl. 32771 (City/State and Zip Code) For further information concerning this matter, please call: Earl R. Starkey 467-1992 (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Amendment Section **Street Address:** Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

Tricia M. Starkey	2015 AUG - / PM 47 44 Asst.
	hereby resion as WING MAIN OF STATE
*	, hereby resign as FALEARIA STORD, FLORIDA
_	
ERS. Construction Inc. of	
(Nat	ne of Corporation)
P0400003283	
	, a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	
	 ·
Trice	a Starkey
	(Signature of resigning office /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