

P040000013508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

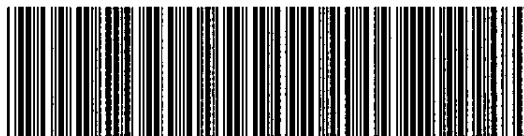
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04/27/09--01051--011 **35.00

officer Resign.

TB

5-1-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IMAGE MASTERS PHOTOGRAPHY, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000013508

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

Please return all correspondence concerning this matter to the following:

LORI ANN DONNELLY

(Name of Person)

IMAGE MASTERS PHOTOGRAPHY, INC

(Name of Firm/Company)

1899 NW 107TH DRIVE

(Address)

CORAL SPRINGS, FL 33071

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES F. DONNELLY, JR

(Name of Person)

at (954) 242-7343

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

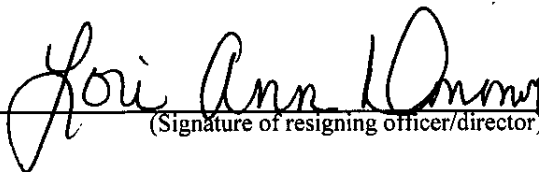
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, LORI ANN DONNELLY, hereby resign as DPS
(Title)

of IMAGE MASTERS PHOTOGRAPHY, INC.
(Name of Corporation)

P04000013508, 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