

P 0400003/080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

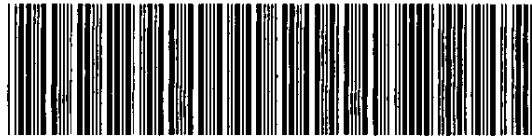
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Prichard Construction of North Florida, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P4000031080

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

Please return all correspondence concerning this matter to the following:

Tracey Prichard

(Name of Person)

Prichard Construction of North FL, Inc.

(Name of Firm/Company)

PO Box 1046

(Address)

Middleburg, FL 32050

(City/State and Zip Code)

For further information concerning this matter, please call:

Tracey Prichard

(Name of Person)

at (904) 358.3720

(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**

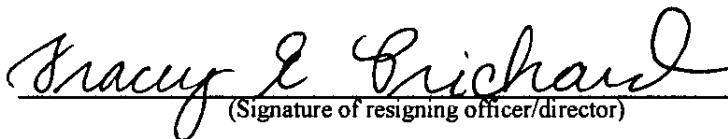
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Tracey E. Prichard, hereby resign as Title D
(Title)

of Prichard Construction Of North Florida, Inc.
(Name of Corporation)

P04000031080, a corporation organized under the laws of the State of
(Document Number, if known)

Florida. EFFECTIVE 12.31.2009


(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