

PK4000031888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

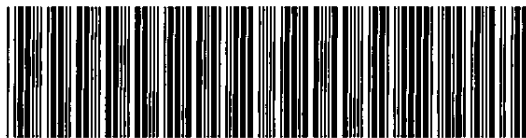
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06 JUN 16 PM 1:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

JUN 21 2006

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Certified Windshield Repair Inc.
(Name of Corporation)

DOCUMENT NUMBER: p04000031888

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

Please return all correspondence concerning this matter to the following:

Charles Moore

(Name of Person)

Certified Windshield Repair Inc.

(Name of Firm/Company)

246 redwood rd

(Address)

Venice, FL 34293

(City/State and Zip Code)

For further information concerning this matter, please call:

Charles Moore

at (941) 416-2381

(Name of Person)

(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**

I, Ryan D Moore, hereby resign as vpm
(Title)

of Certified Windshield Repair Inc.
(Name of Corporation)

p04000031888, 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

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