## P0400035184

(Re	equestor's Name)	
. (Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	of Status
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Special Instructions to Filing Officer:		
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SECRETARY OF STATE
SECRETARY OF STATE

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## **COVER LETTER**

Amendment Section

Division of Corporations	
SUBJECT: BB & K Inc.	
	(Name of Corporation)
DOCUMENT NUMBER: PO	4000035184
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
R. L. Register	
(Name of Pe	erson)
BB & K Inc.	
(Name of Firm/C	Company)
450 Wynfield Cr.	
(Address	3)
Rockledge, Fl. 32955	
(City/State and 2	Lip Code)
For further information concerning	g this matter, please call:
R. L. Register	at ( 321 ) 725-4711 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade 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

R. L. Register	herehy resion as	, hereby resign as Vice President	
		(Title)	
BB & K Inc.		,	
	ame of Corporation)		
04000035184	, a corporation organized ur	nder the laws of the State of	
(Document Number, if known)			
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**FILING FEE IS \$35.00** 

Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314