

PD4000050215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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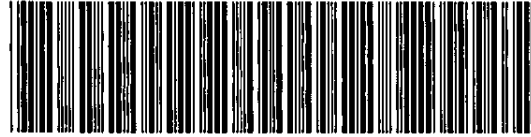
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
12 NOV -5 PM 3:27

NOV 07 2012

T. ROBERTS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Blanchette & Associates, Inc.

SUBJECT: _____
(Name of Corporation)

P04000050215

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:

Gerard Blanchette

(Name of Person)

Blanchette & Associates, Inc.

(Name of Firm/Company)

2074 N HWY 79

(Address)

Bonifay, FL 32425

(City/State and Zip Code)

For further information concerning this matter, please call:

Gerard Blanchette at **(850) 532-2178**
(Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 NOV -5 PM 3:27

Rosetta M Blanchette

PDS

I, _____, hereby resign as _____
(Title)

Blanchete & Associates, Inc.

of _____
(Name of Corporation)

P04000050215

_____, 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