## P04000057517

| (Requestor's Name)                      |  |
|---|--|
| (Address)                               |  |
| (Address)                               |  |
|   |  |
| (City/State/Zip/Phone #)                |  |
| PICK-UP WAIT MAIL                       |  |
| (Business Entity Name)                  |  |
| (Document Number)                       |  |
| Certified Copies Certificates of Status |  |
| Special Instructions to Filing Officer: |  |
|   |  |
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## TRANSMITTAL LETTER

| Division of Corporations   |  |
|--|--|
| SUBJECT: WILLIS WELDING INC.   | , <u></u>  |
| (Name of Corpor  | ation)   |
| DOCUMENT NUMBER: P04000057517  | ا المستقدم   |
| The enclosed Officer/Director Resignation for a Corporation  | n and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the   | ne following:  |
| CHARLES L WILLIS   | and the second s |
| (Name of Person)   | <u>- 1 (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2</u>  |
| WILLIS WELDING INC. (Name of Firm/Company)   | gangaran kanggaran di kalanggaran kanggaran di kanggaran di kanggaran kanggaran di kanggaran di kanggaran di k<br>Banggaran kanggaran di kanggaran   |
| PO BOX 1766  |  |
| PO BOX 1/66 (Address)  |  |
| MIDDLEBURG,FL 32050  | and the second s |
| (City/State and Zip Code)  |  |
| For further information concerning this matter, please call:   |  |
| CHARLES L WILLIS at 904  | 251-5164<br>e & Daytime Telephone Number)  |
| (Name of Person) (Area Cod   | e & Daytime Telephone Number)  |
| Enclosed is a check for \$35.00 made payable to the Florida  | Department of State.   |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399 |  |

TO: Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, THOMAS S WILLIS                       | , hereby resign as PRESIDENT                             |
|--|--|
| of WILLIS WELDING INC.                   | (Title)  |
| (Na                                      | ne of Corporation)                                       |
| P04000057517 (Document Number, if known) | , a corporation organized under the laws of the State of |
| 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