P04000071217

(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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SECRETARY OF STATE
VISION OF CORPORATIONS

OPER 11 PM 1:89

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Lawrence &	Sons Carpe	•	- .	
		((Name o	of Corpora	ation)
DOCUMENT	NUMBER:	P0400007	1217		
The enclosed (Officer/Director	Resignation for	or a Co	rporation	and fee are submitted for filing
Please return a	ll corresponden	ce concerning	this ma	itter to th	e following:
Raymond	ł Hickey				
	(Name o	f Person)			
Mr Tax of	Gulf Breeze, Ir	ıc			
	(Name of Fir	m/Company)			
913 Gulf E	Breeze Pkwy #	# 5			
	(Add	ress)			
Gulf Bree	ze, FL 32562				
•	(City/State a	nd Zip Code)			
For further info	ormation concer	ning this matt	er, plea	se call:	
Ray Hickey			at (850	934-4288 & Daytime Telephone Number)
-	(Name of Person	1)	(<i>F</i>	rea Code	& Daytime Telephone Number)
Enclosed is a c	heck for \$35.00	made payable	e to the	Florida I	Department of State.
Street Addres Amendment Se Division of Co Clifton Buildin 2661 Executive	ection rporations g Center Circle	Amend Division Post O	ffice Bo	ress: ection orporation ox 6327 L 32314	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Cindy K. Lawrence	, hereby resign as Vice President
	(Title)
Lawrence & Sons Carpet Laying	_
(Name of C	Corporation)
P04000071217 (Document Number, if known)	a corporation organized under the laws of the State of
Florida	
Ain,	duk haurenee 1/1/08
(Sigr	nature 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

