P04000079231

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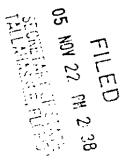
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COVER LETTER

| Division of Corporations |
|-----------------------------------------------------------------------------------------------|
| SUBJECT: Simpson, Riecks & Delgado (Name of Corporation) DOCUMENT NUMBER: P0400079231 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| James Riecks (Name of Person) |
| Simpson, Riecks & Delgado (Name of Firm/Company) |
| 227 Seabreeze Blvd. (Address) |
| Daytona Beach FL 32118 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Arthur A. Simpson at (386) 255-1400 (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

05 NOV 22 PH 2: 38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| 1, JAMES RIECKS | , hereby resign as Secretary (Title) |
|---------------------|-----------------------------------------------------|
| of Simpson & Riecks | P. A |
| Pa4222274222 | orporation 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