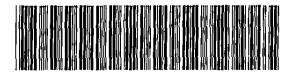
P.0400008950

(Re	equestor's Name)	
(Ad	ldress)	
—————(Ad	idress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
_	-	····,
(Do	cument Number)	
(,	
Certified Copies	Certificates	of Status
octanica oopies		O O CIRCUS
		
Special Instructions to	Filing Officer:	
		j
		}
		

Office Use Only



300060754903

COVER LETTER

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

I,	Keith Lemoi, hereby resign as VP	Title)	<u>. </u>
of	JB Trim, /nc (Name of Corporation)		,
<u>P0</u>	(Document Number, if known) a corporation organized under the laws of the	e State of	
F	-Lorida		
	(Signature of resigning officer/director)	05 OCT 24 PII	
	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