

PO4 000122839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

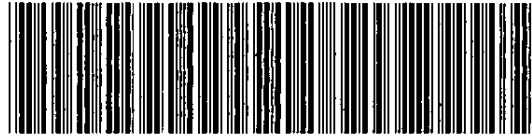
(Business Entity Name)

(Document Number)

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*000122839
8/10/09*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: B & D ENTERPRISES OF OCKLAWAHA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000122839

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEBORAH OLSON
(Name of Person)

B & D ENTERPRISES OF OCKLAWAHA, INC.
(Name of Firm/Company)

19175 SE 44TH STREET
(Address)

OCKLAWAHA, FL 32179
(City/State and Zip Code)

For further information concerning this matter, please call:

J. WARREN BULLARD at (352) 732-5900
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BOB OLSON, hereby resign as PRESIDENT
(Title)

of B & D ENTERPRISES OF OCKLAWAHA, INC.
(Name of Corporation)

P04000122839, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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(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