## P04000136192

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





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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: WALKER SERVICES INC. (Name of Corporation)
DOCUMENT NUMBER: <u>P04000136192</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filling
Please return all correspondence concerning this matter to the following:
GRIFFITH DAVID (Name of Person)
(Name of Firm/Company)
4707 DARWOOD OR. (Address)
ORLANDO PL. 328/2 (City/State and Zip Code)
For further information concerning this matter, please call:
WALKER CURTIS at (407) 3>5-3646 (Name of Person) at (407) 3>5-3646 (Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, DAVIO GRIFFITH hereby resign as VICE	PRESIDENT
of WALKER SERVICES INC. (Name of Corporation)	
Po4000136192 a corporation organized under the laws (Document Number, if known)  FLORIOA	of the State of
1 LOKIOH	
(Signature of resigning officer/director)	07 FEE
(Signature of resigning officer/director)	FILE FEB 15 PM LAHASSEE, F
	PH 4: 09 OF STATE E. FLORID

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