

P04000165823

(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:

Office Use Only



400265404804

10/16/14--01015--026 **70.00

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Williams & Robertson, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P04000165823

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

Please return all correspondence concerning this matter to the following:

Alain Kleinsinger

(Name of Person)

(Name of Firm/Company)

1236 Drexel Avenue #2

(Address)

Miami Beach, Florida 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

Dennis R. Bedard 305 5300795
_____ at (_____) _____

(Name of Person)

(Area Code & Daytime Telephone Number)

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

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
14 OCT 16 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

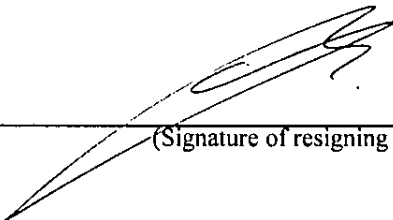
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Claude Kleinsinger, hereby resign as Officer/Director
(Title)

Williams & Robertson, Inc.
of _____
(Name of Corporation)

P04000165823

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

FILED
14 OCT 16 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA