

POS000010667

(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



300248335243

06/18/13--01008--011 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUN 18 AM 9:22

Handwritten signature and date 6-20-13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Price Mechanical, Inc.
(Name of Corporation)

DOCUMENT NUMBER: POS000010667

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

Please return all correspondence concerning this matter to the following:

Marie Price
(Name of Person)

Price Mechanical, Inc.
(Name of Firm/Company)

Po Box 785
(Address)

Gulf Breeze, Fl. 32562
(City/State and Zip Code)

For further information concerning this matter, please call:

Marie Price at (850) 932-5990
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Marie Price, hereby resign as Director
(Title)

of Price Mechanical, Inc.
(Name of Corporation)

P05000010667, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Marie Price
(Signature of resigning officer/director)

FILED
13 JUN 18 AM 9:22
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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