

POS000030047

(Requestor's Name)

Dina John

5112 CLARKSON HAMMOCK DR

— Orlando, FL 32808-1620

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

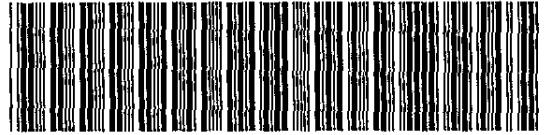
(Business Entity Name)

(Document Number)

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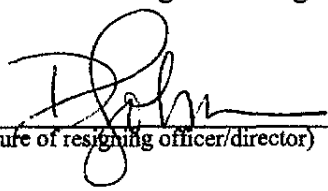
of 2

OFFICER / DIRECTOR RESIGNATION

I, DINA JOHN, hereby resign as TREASURER
(Title)
of THOMAS & JOHN ENTERPRISES, INC.
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.


(Signature of resigning officer/director)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
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