

P05000031371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

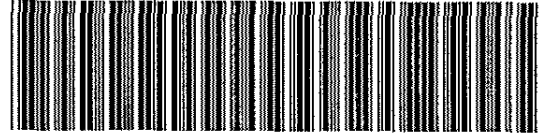
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100058821871

08/26/05--01019--022 **35.00

FILED
05 AUG 26 PM 4: 02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-30
all off
res

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PAN-SHOVEL CYCLE WORKS
(Name of Corporation)

DOCUMENT NUMBER: P.O. 5000031371

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

Please return all correspondence concerning this matter to the following:

Phillip W. JAMES
(Name of Person)

PAN-SHOVEL CYCLE WORK
(Name of Firm/Company)

6203 Camp Lee Rd
(Address)

WEST PALM BEACH FL 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

Phillip JAMES at (561) 707-3976
(Name of Person) (Area Code & Daytime Telephone Number)

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

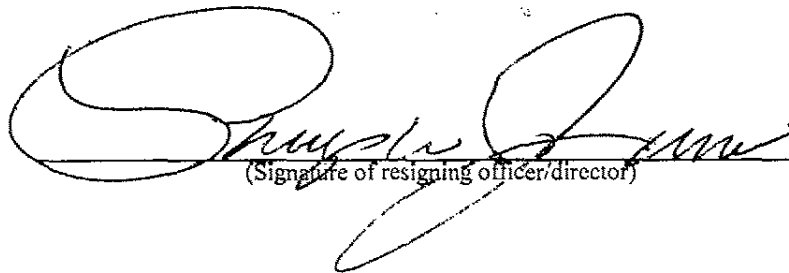
Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Phillip W. James, hereby resign as PRESIDENT/DIRECTOR
(Title)
of PAN SHOVEL CYCLE WORKS INC.
(Name of Corporation)

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


(Signature of resigning officer/director)

FILED
05 AUG 26 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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