

# P05000045865

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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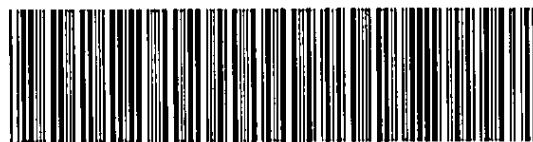
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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MASSACHUSETTS

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** NewKirk's Home Services Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000045865

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

Please return all correspondence concerning this matter to the following:

Bryan NewKirk  
(Name of Person)

NewKirk's Home Services Inc.  
(Name of Firm/Company)

810 10<sup>th</sup> St SE  
(Address)

Naples FL 34117  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christine NewKirk at ( 239 ) 289-1518  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Christina Newkirk, hereby resign as Secretary  
(Title)

of Newkirk's Home Services Inc.  
(Name of Corporation)

P05000045865, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Christina Newkirk  
(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

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TALLAHASSEE, FL 32314