P05000059318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TO: Amendment Section
Division of Corporations

SUBJECT: Thornhill & Trakas, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P05000059318

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

Please return all correspondence concerning this matter to the following:

Tina Trakas
(Name of Person)

Thornhill & Trakas, P.A.
(Name of Firm/Company)

P.O. Box 9495
(Address)

Winter Haven, FL 33881
(City/State and Zip Code)

For further information concerning this matter, please call:

Christine A. Trakas at (863) 295-9300
(Name of Person) (Area Code & Daytime Telephone Number)

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

Effective 2/1/10

I, Christine A. Trakas, hereby resign as P/D
(Title)

of Thornhill & Trakas, P.A.,
(Name of Corporation)

P05000059318, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

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TALLAHASSEE, FLORIDA

Christine A. Trakas
(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