

POS000059318

(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



900248491109

06/04/13--01005--002 **35.00

010RAS
JUN 06 2013
R. WHITE

FILED
13 JUN -4 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Trakas Thornhill, 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:

Christine Trakas Thornhill
(Name of Person)

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

P.O. Box 9495
(Address)

Winter Haven, FL 33883
(City/State and Zip Code)

For further information concerning this matter, please call:

Christine Trakas Thornhill 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.

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

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, David T. Thornhill, Jr., hereby resign as Vice President / Director
(Title)

of Irakas Thornhill, P.A.
(Name of Corporation)

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

Florida. Resignation effective 6/3/13.

(Signature of resigning officer/director)

David T. Thornhill, Jr.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JUN -4 PM 2:58

FILED

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