

P050000073594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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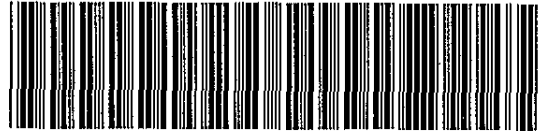
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mathew Dunn, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000073594

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

Please return all correspondence concerning this matter to the following:

Bill Simms  
(Name of Person)

Mathew Dunn, Inc.  
(Name of Firm/Company)

5212 W. Tyson Ave  
(Address)

Tampa, FL 33611  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bill Simms at ( 813 ) 223-7700  
(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**

I, Bill Simms, hereby resign as Secretary  
(Title)

of Mathew Dunn Inc.  
(Name of Corporation)

905000073594, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

FILED  
05 NOV 15 AM 10:00  
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