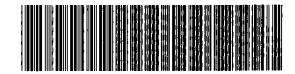
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(Re	equestor's Name)	
(Ad	ldress)	
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JIVISION OF CORPORATION

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Stephon D. Hall, P.A. (Name of Corporation)
DOCUMENT NUMBER: 905000 83298
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Stephen D. Hull (Name of Person)
Stephen D. Hall, P.A. (Name of Firm/Company)
217 Elwa Place (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Stephen D. Hall at (SG1) 310-7229 (Name of Person) at (SG1) 310-7229 (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
Post Office Box 6327
Tallahassee, FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Rever Hall	, hereby resign as	ST
		(Title)
of Stephes D. H. (Name of	all P.A.	
(Name of	Corporation)	
(Document Number, if known)	a corporation organized unc	der the laws of the State of
Florida.		
		,
	;	
	<u>`</u>	
(Jail		
(Sign	nature of resigning officer/directo	or)

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