

P05000083576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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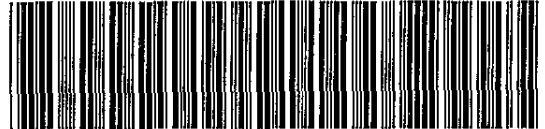
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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OTD Resign.

09/13/05

PC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MYLES HILLIARD, INC.

(Name of Corporation)

DOCUMENT NUMBER: P05000083576

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

Please return all correspondence concerning this matter to the following:

MYLES P. HILLIARD

(Name of Person)

MYLES HILLIARD, INC.

(Name of Firm/Company)

P.O. BOX 1494

(Address)

CHIEFLAND, FL 32644

(City/State and Zip Code)

For further information concerning this matter, please call:

MYLES P. HILLIARD

(Name of Person)

at (850) 221-5210

(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:

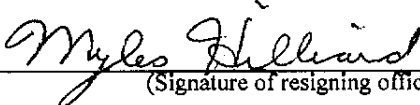
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MYLES P. HILLIARD, hereby resign as SECRETARY
(Title)

of MYLES HILLIARD, INC.
(Name of Corporation)

P05000083576, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(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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DIVISION OF CORPORATIONS
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