

PO5000103854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

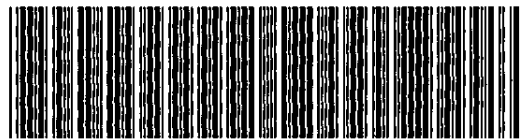
(Business Entity Name)

(Document Number)

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10 DEC 27 PM 4:05
SECRETARY OF STATE
TREASURY DIVISION

APPROVED
FILED

12/29/10
TK

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COASTAL VIEW WINDOWS & DOORS, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000103854

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

Please return all correspondence concerning this matter to the following:

WANDA LAWRENCE-JONES

(Name of Person)

COASTAL VIEW WINDOWS & DOORS, INC.

(Name of Firm/Company)

4232 BLUEBERRY ST.

(Address)

MIDDLEBURG, FL 32068

(City/State and Zip Code)

For further information concerning this matter, please call:

WANDA LAWRENCE-JONES

(Name of Person)

at (904) 291-9036

(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

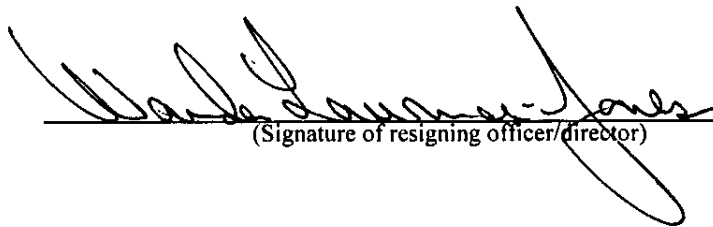
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, WANDA LAWRENCE-JONES, hereby resign as SECRETARY
(Title)

of COASTAL VIEW WINDOWS & DOORS, INC.
(Name of Corporation)

P05000103854, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

10 DEC 27 PM 4:05
SECRETARY
WANDA LAWRENCE-JONES

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