P05000109077	
(Requestor's Name) (Address) (Address)	900208198939
(City/State/Zip/Phone #)	05/31/1101024008 <b>**</b> 35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	Sp/ Rid Reserv
Special Instructions to Filing Officer:	11 HAY 31 AH 11: 21

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

## SUBJECT: REALTY CONSULTANTS OF NW FLORIDA, INC

(Name of Corporation)

DOCUMENT NUMBER: P05000109077

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

Please return all correspondence concerning this matter to the following:

KEVIN T MURPHY

(Name of Person)

REALTY CONSULTANTS OF NW FLORIDA, INC

(Name of Firm/Company)

746 WESTERN LAKE DRIVE

(Address)

SANTA ROSA BEACH, FL 32459

(City/State and Zip Code)

For further information concerning this matter, please call:

**KEVIN MURPHY** 

(Name of Person)

at (<u>850</u>) <u>830-5335</u> (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

CR2E044(08/05)

	R / DIRECTOR RESIGNATION 71 MAY 31 OR A CORPORATION
I,KEVIN T MURPHY	, hereby resign as VP
۶ <u>,                                     </u>	, hereby resign as(Title)
ofREALTY CONSULTANTS C	
(Nai	me of Corporation)
P05000109077 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	

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(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