

P05000135851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

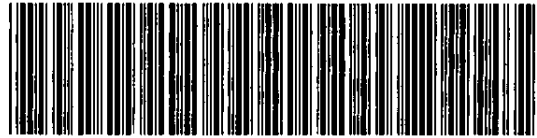
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Off Resign  
Thew's  
12-3-09

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Island Eyes Investigative Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** PO5000135851

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

Please return all correspondence concerning this matter to the following:

Dan Collardey  
(Name of Person)

Island Eyes Investigative Services, Inc.

(Name of Firm/Company)

846 Bald Eagle Drive  
(Address)

Marco Island, Florida 34145  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dan Collardey at (239) 821-2125  
(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**

**FILED**

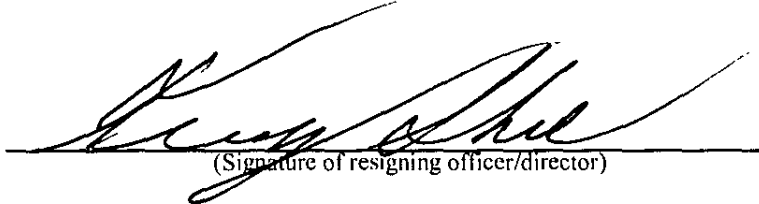
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Terrence J. Shea, hereby resign as President  
(Title)

of Island Eyes Inv. Svc. Inc.  
(Name of Corporation)

PO5000135851, 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