POSOO/369//

(1	Requestor's Name)	
(,	Address)	
. (/	Address)	
· ((City/State/Zip/Phone #)	<u> </u>
PICK-UP	☐ WAIT	MAIL
. (1	Business Entity Name)	
· (I	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		

Office Use Only



800112265058

11/19/07--01081--002 **35.00

2007 HOV 19 PM 2: 34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

of States

11, 87, 9007

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: JEFF E. MUSGRAVE, INC.
(Name of Corporation)
DOCUMENT NUMBER: P05000136911
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
DAVID J. LABOVITZ, ESQ.
. (Name of Person)
Railey & Harding, PA
(Name of Firm/Company)
20 N. Eola Dr.
(Address)
Orlando, FL 32801
(City/State and Zip Code)
For further information concerning this matter, please call:
Debbie Rogers at (407) 648-9119 (Area Code & Daytime Telephone Number)
(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

I, ELLIË MUSGRAVE	, hereby resign as DIRECTOR	
ofJEFF E. MUSGRAVE, INC.	(Title)	
P05000136911 (Document Number, if known)	e of Corporation), a corporation organized under the laws of the State of	
FLORIDA		
	Signature of resigning officer/director) TECH TO THE STATE OF THE STA	
/	ين ۾ ا	

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