

P05000145539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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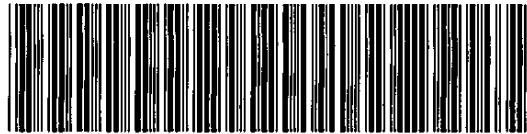
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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O/D Resign.
08/03/06
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Family Farms Inc. of Fort Union
(Name of Corporation)

DOCUMENT NUMBER: P05000145539

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Akela Corbett
(Name of Contact Person)

Family Farms Inc. of Fort Union
(Firm/Company)

4232 County Road 249
(Address)

LIVE OAK, Florida 32060
(City/State and Zip Code)

For further information concerning this matter, please call:

Akela Corbett at (904) 764-4113
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

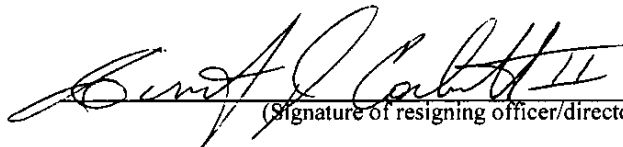
Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ERNEST CORBETT, hereby resign as PRESIDENT
(Title)

of FAMILY FARMS INC. OF FORT UNION,
(Name of Corporation)

D05000145539, 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