

PO5000157553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

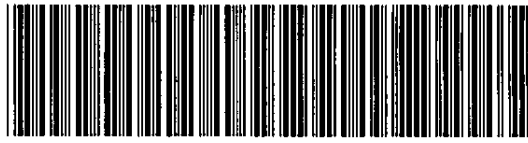
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900263677159

Resignation  
to officer

08/28/14--01017--013 \*\*35.00

FILED  
2014 AUG 28 PM 3:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/14/14

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Grissom & Sons Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000157553

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

Please return all correspondence concerning this matter to the following:

**Cliff Reilly**

(Name of Person)

**Grissom & Sons Inc**

(Name of Firm/Company)

**4607 SW 6th Ave**

(Address)

**Cape Coral, FL 33914**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Cliff Reilly**

(Name of Person)

at ( **941** ) **564-5173**

(Area Code & Daytime Telephone Number)

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

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

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED

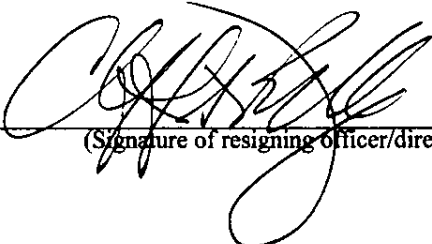
2014 AUG 28 PM 3:06

I, Cliff Reilly, hereby resign as Vice President  
(Title)

of Grissom & Sons Inc  
(Name of Corporation)

P05000157553, 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