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COVER LETTER

WINDSHIELD HPS OF BROWARD CO., INC. (Name of Corporation) P05000164480 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOSEPH PLASKY (Name of Person) WINDSHIELD HPS OF BROWARD CO., INC (Name of Firm/Company) 2401 N.E. 36TH STREET (Address) LIGHTHOUSE POINT, FL. 33064 (City/State and Zip Code) For further information concerning this matter, please call: JOSEPH PLASKY (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Clifton Building Division of Corporations Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, DOUGLAS S GIPSON PRESIDI	ENT, hereby resign as(Title)	-
of WINDSHIELD HPS OF BROWN	ARD CO.,INC. f Corporation)	
P05000164480 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	•	
(Si	gnature of regignific officer/director) Grant Control of the segment of the segm	ローロフ

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