

P060000001803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

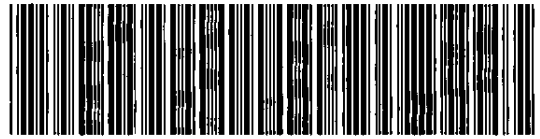
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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100155656571

*Resignation
of Officer*

05/11/09--01023--009 **35.00

FILED
2009 MAY 11 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*AOR
5/15/09*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Blue Heron Docks, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000001803

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

Please return all correspondence concerning this matter to the following:

Brian Casey McCoy
(Name of Person)

(Name of Firm/Company)

22800 Congar Cr.
(Address)

Sorrento FL 32776
(City/State and Zip Code)

For further information concerning this matter, please call:

Casey McCoy at (357) 735-9472
(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, Brian Casey McCoy, hereby resign as VPO
(Title)

of Blue Heron Docks, Inc.
(Name of Corporation)

P06000001803, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Brian Casey McCoy
(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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TALLAHASSEE, FLORIDA