## P06000019903

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	<del>e</del> #)
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SECRETARY OF ST ALLAHASSEE, FLO

T. Robotte JAN 25 2007/

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: GULF COAST Shutters OF SW Florida COIP		
DOCUMENT NUMBER: P0600019903		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Francisco J. francia. (Name of Person)		
Fulf Coast Shutters of SW Florida. (Name of Firm/Company)		
1868 Par Dr. (Address)		
Naples, FL 34120 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Francisco T. Garcia at (Z39) 404-0163. (Name of Person) (Area Code & Daytime Telephone Number)		

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

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION FOR A CORPORATION OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION OFFICER / DIRECTOR RESIGNATION OFFICE

(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