

PO6000034884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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09 AUG 10 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resign
C.COULLIETTE

AUG 12 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PRO TREATMENT ENTERPRISES INC
(Name of Corporation)

DOCUMENT NUMBER: P06000034884

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

Please return all correspondence concerning this matter to the following:

GUY CONKLIN

(Name of Person)

PRO TREATMENT ENTERPRISES INC

(Name of Firm/Company)

5128 MEADOW LARK LANE

(Address)

NEW PORT RICHEY FL 34653 US

(City/State and Zip Code)

For further information concerning this matter, please call:

BABETTA CONKLIN

(Name of Person)

at (727) 967-2897

(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

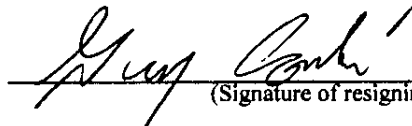
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Guy Conklin, hereby resign as Officer
(Title)

of Pro Treatment Enterprises Inc
(Name of Corporation)

P06000034884, 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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