

PD60000070429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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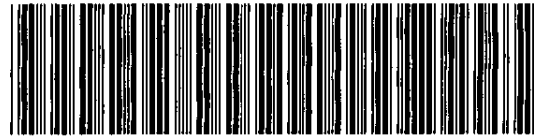
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Precision Restoration, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P06000070429

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

Please return all correspondence concerning this matter to the following:

Chris Cantonis

(Name of Person)

Precision Restoration, Inc.

(Name of Firm/Company)

P.O. Box 1246

(Address)

Dunedin, FL 34697-1246

(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Cantonis

(Name of Person)

at ( 813 ) 475-6914

(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, James D. Fallis III, hereby resign as Vice President  
(Title)

of Precision Restoration, Inc.  
(Name of Corporation)

P06000070429, 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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