## P06000074129

(Requestor's Name)	
(Address)	
(Address)	
( tauloss)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Submoss Endy Hame)	
(Document Number)	
Certified Copies Certificates of Statu	ıs
Special Instructions to Filing Officer:	
Special instructions to Filing Officer.	
	Ī
	i

Office Use Only



000076230020

06/16/06--01021--008 \*\*35.00

FILED

06 JUN 16 AMII: 41

SECRETARY OF STATE

gy off

## **COVER LETTER**

Division of Corporations
SUBJECT: ASPN TO C. (Name of Corporation)
DOCUMENT NUMBER: <u>P06000072229</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Arthur Brter (Name of Person)
ASPN, Inc (Name of Firm/Company)
10012 Montague St. (Address)
Tampa, FL 33626 (City/State and Zip Code)
For further information concerning this matter, please call:
Robin Taylor at (813) 368-5680 (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

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

}

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Arthur Porter , hereby resign as Presid	ent Title)	·	
of ASPN, Anc. (Name of Corporation)			,
Pole 000072279, a corporation organized under the laws of the (Document Number, if known)	ne State of	f	
Horida.	<b>∑</b>	0	
(Signature of resigning officer/director)	LÜRETARY ÜF STATE LLAHASSEE, FLORIB	06 JUN 16 AMII: 44	FILED

## 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