

PO 6 000088594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

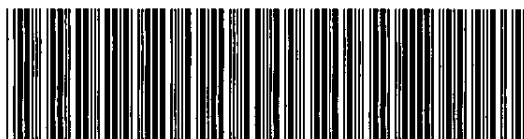
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 08 2009

COVER LETTER

TO: . Amendment Section
Division of Corporations

Effective
12-1-08

SUBJECT: Prolific Cabinetry & More, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000088594

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

Please return all correspondence concerning this matter to the following:

Jack Brust

(Name of Person)

Prolific Cabinetry & More, Inc.

(Name of Firm/Company)

P.O. Box 600902

(Address)

Jacksonville, Florida 32260-0902

(City/State and Zip Code)

For further information concerning this matter, please call:

Jack Brust

(Name of Person)

at (904) 463-7524

(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

SECRETARY
TALLAHASSEE, FL
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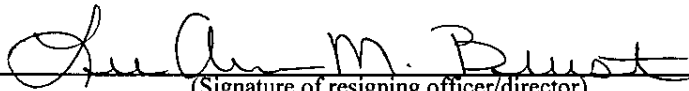
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LeeAnn Brust, hereby resign as DP Director/President
(Title)

of Prolific Cabinetry & More, Inc.,
(Name of Corporation)

P06000088594, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

Effective 12-1-08


(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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