

P0600D0888/2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

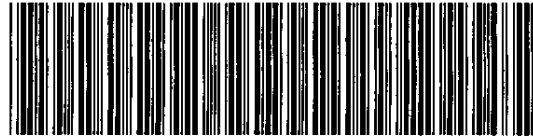
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800083748058

01/12/07--01013--020 **35.00

Off/Lin Resign

07 JAN 12 AM 11:13
T. Roberts
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MBR Fox Enterprises, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000088812

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

Please return all correspondence concerning this matter to the following:

Robert A. Fox, Jr.

(Name of Person)

MBR Fox Enterprises, Inc.

(Name of Firm/Company)

C/O Cape PT
24123 Peachland Blvd, Unit C-3

(Address)

Port Charlotte FL 33958

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert A. Fox, Jr.

(Name of Person)

at (

941

)

441-5242

or 941-743-8088

(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**

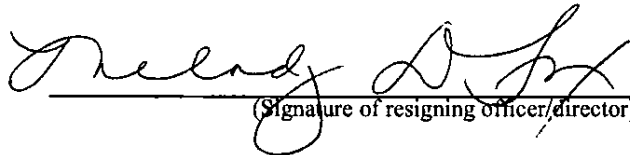
I, Melody D. Fox, hereby resign as Secretary & Board of Directors
(Title)

of MBR Fox Enterprises, Inc.
(Name of Corporation)

P06000088812, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

FILED
07 JAN 12 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, 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