6000091261

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP		MAIL
(Bu	siness Entity Nan	ne)
- (Do	cument Number)	
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10 Res, g.m.
10 (11/07)

COVER LETTER

TO: Amendment Section Division of Corporations				
SUB	JECT: Florida Coast Shutters, Inc.			
	(Name of Corporation)			
DOC	CUMENT NUMBER: P06000091261			
The	The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Pleas	se return all correspondence concerning this matter to the following:			
Lar	ry L. Hall			
	(Name of Person)			
	(Name of Firm/Company)			
145	59 Creekside Drive, #1029			
	(Address)			
Wa	Inut Creek, CA 94596			
	(City/State and Zip Code)			
For f	further information concerning this matter, please call:			
Larr	y L. Hall at (925) 270-6415 (Name of Person) at ((Area Code & Daytime Telephone Number)			
	(Name of Person) (Area Code & Daytime Telephone Number)			
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.			
Ame Divis Clift 2661	et Address: Indiment Section Sion of Corporations On Building Executive Center Circle Shassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314			

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Larry L. Hall	, hereby resign as Director
	(Title)
of_ Florida Coast Shutters, Inc.	,
(Name of	Corporation)
P06000091261 (Document Number, if known)	a corporation organized under the laws of the State of
Florida	,
Jany (Sign	SECRETARY OF STATISTATURE of Vesigning officer/director) And Secretary of Statistature of Vesigning 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