P06000091412

(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:
Special instructions to 1 lining Officer.
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06/10/08--01011--004 ++35.00

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08 JUN 10 PM 2: 02

SLEERINGLY OF STATE

Or Man

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: COX UNDERGRO	OUND CONSTRUCTION, INC.
SCBSECT	(Name of Corporation)
DOCUMENT NUMBER: PO	6000091412
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted for filing
Please return all correspondence c	oncerning this matter to the following:
JOHN T COX SR	•
(Name of Pe	rson)
COX UNDERGROUND CONS	STRUCTION, INC.
(Name of Firm/C	Company)
2319 GILLIS STREET	
(Address	
PALATKA, FLORIDA 32177	
(City/State and 2	(ip Code)
For further information concerning	g this matter, please call:
LISA WIGGINS	at (at (386
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	nde 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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JODI COX	, hereby resign as TRES		
,	, noted y redigit us	(Title)	
of_COX UNDERGROUND C	ONSTRUCTION, INC.		
	Name of Corporation)		,
P06000091412 (Document Number, if known)	, a corporation organized under the laws	of the Stat	_
FLORIDA	, Lup	LLI AHASSEE, FLORIO	FILED 08 JUNIO PM 2:02
* Jan	(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