

PD6000127349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

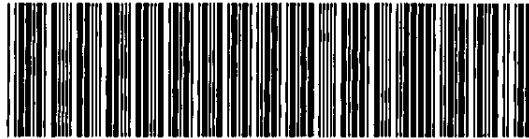
(Business Entity Name)

(Document Number)

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07 MAY - 1 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OLD. Res.

SP

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EVANS & MARVIN Inc
(Name of Corporation)

DOCUMENT NUMBER: PD 6000127349

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

MARC A MARVIN
(Name of Person)

EVANS & MARVIN Inc
(Name of Firm/Company)

819 COURT ST. N.W.
(Address)

CLARWATER FL 33756
(City/State and Zip Code)

For further information concerning this matter, please call:

KIM EVANS at (727) 798-6680
(Name of Person) (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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARC MARVIN, hereby resign as Pres.
(Title)

of ~~South Coast Furniture Inc~~ Evans-Marvin Inc.
(Name of Corporation)

P06000127349, a corporation organized under the laws of the State of
(Document Number, if known)

FL


(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