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Poloou	0136200
(Requestor's Name) (Address)	700116204017
(City/State/Zip/Phone #)	937 Amm 02/04/0801016013 **35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	Ž.
Special Instructions to Filing Officer:	FILED BRFEB-4 PH 3:42 CORETARY OF STATE LAHASSEE, FLORIDA
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PRO-FORMANCE BEALTY SERVICES INC (Name of Opporation) DOCUMENT NUMBER: PO6000136200

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

Please return all correspondence concerning this matter to the following:

Name of Person) PRO-FORMANCE REALTY SERVICES (Name of Firm/Company) INC 3957 58 th ST N (Address) ST PETERSBURG FL (City/State and Zip Code) 33709

For further information concerning this matter, please call:

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

ELIZABETH CAMP IRECTOR Hereby resign as_ (Title) PRU-FORMANCE REALTY (Name of Corporation) SERVICES NC of_ 06000136200 (Document Number, if known) a corporation organized under the laws of the State of

ignature of resigning officer/director)

-LORIDA

FILING FEE IS \$35.00

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Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314