

PO6000143256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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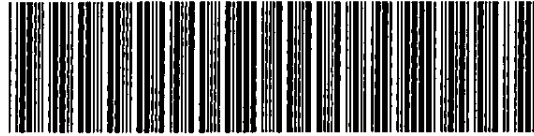
(Business Entity Name)

(Document Number)

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4/13/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Austin Miller Cabinetry, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 7 06000143256

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

Please return all correspondence concerning this matter to the following:

Jeffrey T. Miller
(Name of Person)

Austin Miller Cabinetry, Inc.
(Name of Firm/Company)

2061 Indian Rd. Unit C
(Address)

West Palm Beach, FL 33409
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeff Miller at (561) 310 1589
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Lynn E. Austin, hereby resign as Director of Sales
(Title)

of Austin Miller Cabinetry, Inc.
(Name of Corporation)

P06000143256, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Lynn E. Austin
(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

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