

P0600015198Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

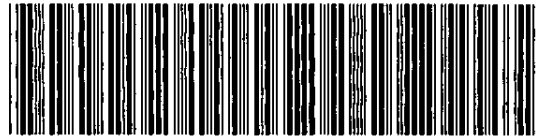
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000136847330

10/14/08--01035--013 **35.00

FILED
2008 OCT 14 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off Recypr
Tewis
10-21-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BIG DICK CUSTOMS, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO 6000151982

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

Please return all correspondence concerning this matter to the following:

DAVID L. ROBINSON
(Name of Person)

BIG DICK CUSTOMS, INC.
(Name of Firm/Company)

P.O. Box 1691
(Address)

LAND-O-LAKES, FL 34639
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID L. ROBINSON at (813) 325-7584
(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**

FILED

2008 OCT 14 AM 10:03

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, DAVID L. ROBINSON, hereby resign as DIRECTOR
(Title)

of BIG DICK CUSTOMS, INC.
(Name of Corporation)

PO 6000151982, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

DG. Boh
(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