

P06000157251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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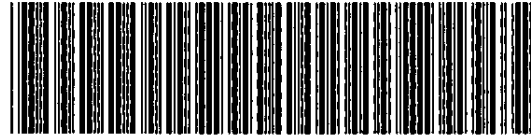
(Business Entity Name)

(Document Number)

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HALL ATTESTATION

MAY 16 2013  
T. LEMIEUX

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mathis & Murphy, P.A.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000157251

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

Please return all correspondence concerning this matter to the following:

Kelly Mathis  
(Name of Person)

Mathis & Murphy, P.A.  
(Name of Firm/Company)

1200 Riverplace Boulevard  
(Address)

Jacksonville, FL 32207  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kelly Mathis at ( 904 ) 396-5500  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

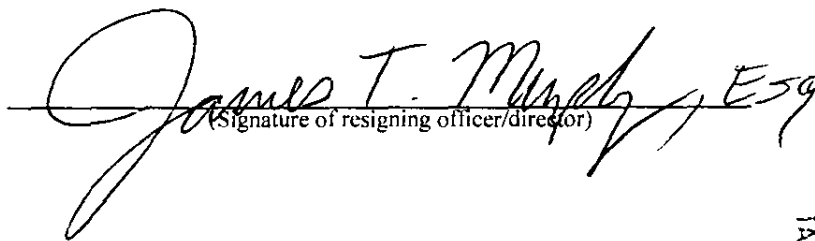
**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, James T. Murphy, Esq, hereby resign as Office/Director  
(Title)

of Mathis & Murphy, P.A.  
(Name of Corporation)

P06000157251, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

  
(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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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