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SUBJECT: Hanson Skiff, Inc. (Name of Corporation) P07000004359 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Trevor Hanson (Name of Person) Hanson Skiff, Inc. (Name of Firm/Company) 502 Normandy Rd. (Address) Madeira Beach FL 33708 (City/State and Zip Code) For further information concerning this matter, please call: Trevor Hanson (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Clifton Building **Division of Corporations** Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

լ Linda T. Rice	hereby resign as Vice Pres	, hereby resign as	
1,	, nerecy rough w	(Title)	
of Hanson Skiff, Inc			
(N	ame of Corporation)		
(Document Number, if known)	, a corporation organized under the law	s of the State of	
Florida		ZIII DEC	
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_ Chi	(Signature of resigning officer/director)	PH 2: 54	

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