

PD7000039949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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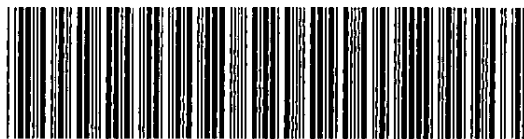
(Business Entity Name)

(Document Number)

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Res.

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Storm Solutions of Northeast Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000039949

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

Please return all correspondence concerning this matter to the following:

Benjamin W. Buchanan
(Name of Person)

Storm Solutions of Northeast Florida, Inc.
(Name of Firm/Company)

37176 W. 4th Street
(Address)

Hilliard, FL 32046
(City/State and Zip Code)

For further information concerning this matter, please call:

David M. King at (904) 880-4333
(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, Benjamin W. Buchanan, hereby resign as Vice President
(Title)

of Storm Solutions of Northeast Florida, Inc.
(Name of Corporation)

P07000039949, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

BjWB
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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