P07000065403

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(Requestor's Name)
,
(Address)
(Address)
· ·
(City/State/Zip/Phone #)
(Only State) Light Holle II)
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(Business Entity Name)
(Document Number)
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M/Du Resign

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

SUBJECT: TRophy Island HowTr OF CITEUS COUNTY INC (Name of Corporation)
DOCUMENT NUMBER: PO 7000065403
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DOMINIC PROLE (Name of Person)
TRophy Island HUNTE OF CITRUS ROCKTY INC
1:5729 U.S. 12 19 (Address)
Hudson 72. 34667 (City/State and Zip Code)
For further information concerning this matter, please call:
Dany Name of Person) at (252) 464-5-907 (Name of Person) (Area Code & Daytime Telephone Number)

Amendment Section Division of Corporations

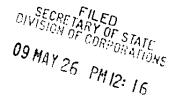
TO:

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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



1. Daminic PR	$\angle c$, hereby resign as \sqrt{P} (Title)
of Trophy Island	of Corporation)
POTOUDO(STYD] (Document Number, if known)	, a corporation organized under the laws of the State of
Flori Las.	

(Signature of resigning officer/director)

I was gut on As V.d. without knowlegs. Of IT was under NATHAN FLORIAN DNLY, UNTIL WERK OF MAY 15T. OF I HAVE NOT SIGNED ALY. FILING FEE IS \$35.00 CORPORATE PAPIEL.

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314