

P07000084797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

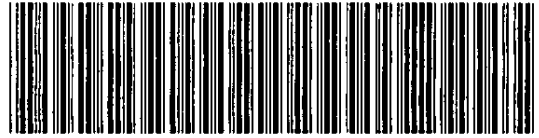
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Resign
C.COULLETTE

JUL 15 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ESCPA, INC.

(Name of Corporation)

DOCUMENT NUMBER: P07000084797

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

Please return all correspondence concerning this matter to the following:

PAUL J. FRATICELLI

(Name of Person)

ESCPA, INC.

(Name of Firm/Company)

P.O. BOX 1465

(Address)

TAVERNIER, FL. 33070

(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL FRATICELLI at (305) 853-5557

(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, ELLIOTT W. STARMAN, hereby resign as PRESIDENT/DIRECTOR
(Title)

of ESCPA, INC.
(Name of Corporation)

P07000084797, 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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