

PO 7000087967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

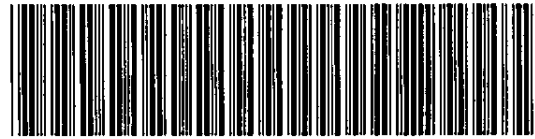
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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700250229827

Resignation
of officer

07/31/13--01006--004 **35.00

2013 JUL 31 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
8/2/13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bonaccorsy and Fuller, P.A.

(Name of Corporation)

DOCUMENT NUMBER: P07000087967

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

Please return all correspondence concerning this matter to the following:

David D. Fuller, Jr.

(Name of Person)

David D. Fuller, P.A.

(Name of Firm/Company)

5 Boulder Rock Drive, Suite F

(Address)

Palm Coast, FL 32137

(City/State and Zip Code)

For further information concerning this matter, please call:

David D. Fuller, Jr.

(Name of Person)

at (386) 447-5377

(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER/ DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2013 JUL 31 PM 3:49

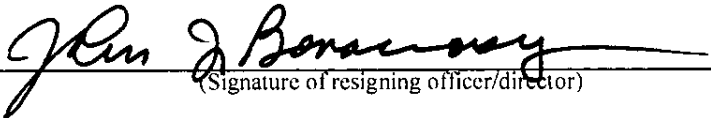
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, John J. Bonaccorsy, hereby resign as PTD
(Title)

of Bonaccorsy and Fuller, P.A.
(Name of Corporation)

P07000087967, 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