## P0800000 1823

(Requestor's Name)		
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## TRANSMITTAL LETTER

JBJECT: (Name of Corporation)		
DOCUMENT NUMBER: P080000018	23	
The enclosed Officer/Director Resigna	ation for a Corporation and fee are submitted for filing	
Please return all correspondence conc	erning this matter to the following:	
Daphne Jones		
(Name of Person	)	
Credible Investigations		
(Name of Firm/Comp	pany)	
4739 114th ST N		
(Address)		
St. Petersburg, FL 33708		
(City/State and Zip C	Code)	
For further information concerning the	is matter, please call:	
Thomas Jones	at (727 459-8614 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	

Mailing Address:

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

Amendment Section Division of Corporations

TO:

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Daphne Jones	Secretary, hereby resign as	
		(Title)
Credible Investigations i \ \ \( \) \ of		,
(Nar	me of Corporation)	
P08000001823	a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
	<del></del>	

(Signature of resigning officer/director)

FILED

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