

PO80000003684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

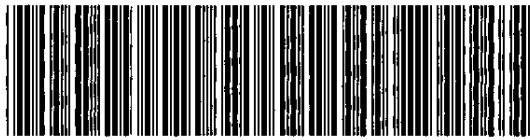
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 16 AM 8:55

T. Roberts MAR 19 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PORT HARDWOOD DISTRIBUTORS AND ACCESSORIES INC

(Name of Corporation)

DOCUMENT NUMBER: P08000003684

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

Please return all correspondence concerning this matter to the following:

John Pourakis

(Name of Person)

Port Hardwood Distributors & Accessories, Inc.

(Name of Firm/Company)

1021 NW Leonardo Circle

(Address)

Port Saint Luice, FL. 34986

(City/State and Zip Code)

For further information concerning this matter, please call:

John Pourakis

(Name of Person)

at (772) 345-2245

(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

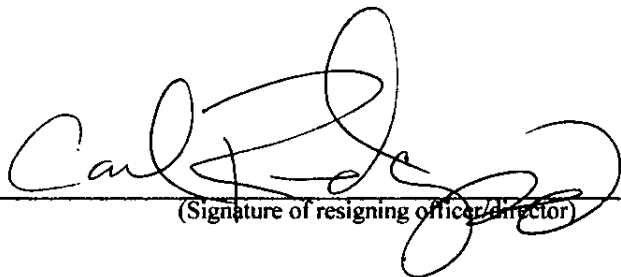
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 16 AM 8:55

I, Carl Randazzo, hereby resign as President
(Title)

of Port Hardwood Distributors¹ Accessories, Inc.
(Name of Corporation)

P08000003684, 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