

POS00000006998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

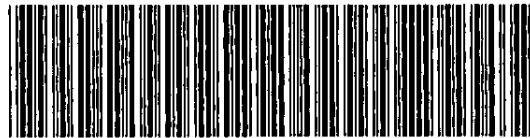
(Business Entity Name)

(Document Number)

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100247483281

Resignation  
of officer

05/06/13--01008--022 \*\*35.00

FILED  
2013 MAY -6 PM 4: 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DR  
5/9/13

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** All Impact Glass, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000006998

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Thomas A. Moore  
(Name of Person)

All Impact Glass, Inc.  
(Name of Firm/Company)

6451 East Rogers Circle, Suite 10  
(Address)

Boca Raton, FL 33487-2601  
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas A. Moore at ( 561 ) 699-9787  
(Name of Person) (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  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

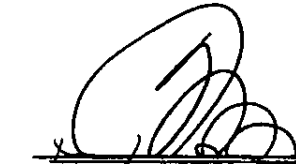
FILED  
2019 MAY -6 PM 4:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Tamara M. Moore, hereby resign as President  
(Title)

of All Impact Glass, Inc.  
(Name of Corporation)

P08000006998, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
\_\_\_\_\_  
(Signature of resigning officer/director)  
*Tamara M. Moore*

**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