P08000009408

(Requestor's Name)
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(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:

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officer Resignation

TB 5-2-19

COVER LETTER

Division of Corporations
SUBJECT: Pro Site Time. (Name of Corporation)
DOCUMENT NUMBER: VOSCOCO9408
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
all w Gulf to Lake Huy
Lecarto FL 34461 (City/State and Zip Code)
For further information concerning this matter, please call:
Rob Tillbesg at (352)357-5931 (Name of Person) at (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
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

of Site Inc.

(Name of Corporation)

POSCOCCION

(Name of Corporation)

(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