## P08000034999

| ·                                       |
|---|
| (Requestor's Name)                      |
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| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| SUBJECT: TITUSVILLE FLOORCOVERING AND INSTALLATIONS INC.   |
|--|
| (Name of Corporation)  |
| DOCUMENT NUMBER: P08000034999  |
| 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 K. LESTER   |
| (Name of Person)   |
| TITUSVILLE FLOORCOVERING AND INSTALLATION  |
| (Name of Firm/Company)   |
| 2912 CONWAY DRIVE  |
| (Address)  |
| TITUSVILLE, FL. 32796  |
| (City/State and Zip Code)  |
| For further information concerning this matter, please call:   |
| JOHN K LESTER  at ( 321 ) 431-1134  (Name of Person) (Area Code & Daytime Telephone Number)  |
| (Name of Person) (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

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MALLAHAUSEE, FLORINA

| L LINDA A LESTER            | , hereby resign as VICE PRESIDENT                      | A |
|-----------------------------|--|---|
|                             | (Title)  | - |
| <u> </u>                    | RING AND INSTALLATIONS INC. me of Corporation)         |   |
| -                           | tile of Corporation)                                   |   |
| (Document Number, if known) | a corporation organized under the laws of the State of |   |
| 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