## P0800009344

· (R	equestor's Name)
(A	ddress)
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(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(L	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filling Officer:
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DIVISION OF CORPORATIONS

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## **COVER LETTER**

Amendment Section Division of Corporations

SUBJECT: Native Contracting Consultants of FL Inc.  (Name of Orporation)  DOCUMENT NUMBER: 908000093644
DOCUMENT NUMBER: P08000093644
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mike Mullis (Name of Person)
(Name of Person)  Native Contracting Consultants  (Name of Firm/Company)
718 Shadow Bay Way
OSprey FL 34229 (City/State and Zip Code)
For further information concerning this matter, please call:
Jamie Mullis at (941) 7/6-1375 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jamie Mullis , hereby resign as President
of Native Contracting Consultant of FLU Inc.  (Name of Corporation)  ON ON AND OR ALLI
P080000 93 644, a corporation organized under the laws of the State of (Document Number, if known)
Florida
Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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