P08000107029

(Requestor's Name)		
. (Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate	es of Status
Special Instructions to Filing Officer:		

Office Use Only



000182828300

07/06/10--01045--024 **35.00

2010 JUL -6 PH 1: 15
SECRETARY OF STATE

off. Resign.

TB

JUL - 8 2010

COVER LETTER

SUBJECT: Thomas C. Matevia, P.A. (Name of Corporation) P08000107029 DOCUMENT NUMBER: 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 Matevia** (Name of Person) Thomas C. Matevia, P.A. (Name of Firm/Company) 250 W INDIANTOWN RD, STE 108 (Address) Jupiter, FL 33458 (City/State and Zip Code) For further information concerning this matter, please call: Thomas C. Matevia (Area Code & Daytime Telephone Number) (Name of Person) 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

TO: - Amendment Section

Division of Corporations

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION SECRET SECRET

Thomas C. Matevia, P.A.

(Name of Corporation)

P08000107029
(Document Number, if known)

Florida

| Name of Corporation organized under the laws of the State of Corporation organized under the Laws of Corporation organized under the Corporation or

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