

P89000075370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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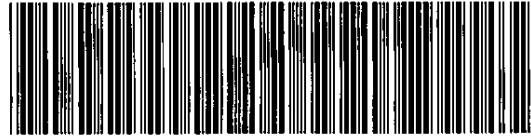
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: NORTH FLA TECHNICAL SERVICES  
(Name of Corporation)

DOCUMENT NUMBER: P09000075370

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LINDA A. PRICE  
(Name of Person)

NORTH FLA TECHNICAL SERVICES  
(Name of Firm/Company)

13607 SW 66<sup>TH</sup> TERRACE  
(Address)

ARCHER, FL. 32618-4301  
(City/State and Zip Code)

Mailing address  
Linda A. Price  
P.O. Box 140375  
Gainesville, FL. 32614-0375

For further information concerning this matter, please call:

LINDA A. PRICE at ( 352 ) 317-5667  
(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

I, LINDA A PRICE, hereby resign as VS / vice president  
(Title)

of NORTH FLA TECHNICAL SERVICES, INC.  
(Name of Corporation)

P09000075370, a corporation organized under the laws of the State of  
(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

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