P10000021029

(Requestor's Name)		
(Address)		
(Address)		
((daress)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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(Document Number)		
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Codified Conice Codification of Chatra		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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STREET OF SHIP



02/3/2

COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	JECT:_FORT PIERCE1,INC.
	(Name of Corporation)
DOC	CUMENT NUMBER: P10000021029
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
RO	HIT C.PATEL
-	(Name of Person)
FOR	RT PIERCE 1,INC.
	(Name of Firm/Company)
260	1 SOUTH US 1
	(Address)
FOF	RT PIERCE,FL,34982
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
ROH	AIT C.PATEL at (772) 293-1551 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divisi Clifto 2661	t Address: Independent Section Identify

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,NIMISHA R.PATEL	, hereby resign as V.P.
	(Title)
of FORT PIERCE 1,INC.	
	Corporation)
P10000021029 (Document Number, if known)	a corporation organized under the laws of the State of
FLORIDA	
<u></u>	R. Actal.

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 10 DEC -6 PH 2: 47