P100000 48202

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies		of Status
Special Instructions to Filing Officer:		

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13 DEC -- 2 PH 2: 54

(DEC 0 9 2013 T. CARTER

TRANSMITTAL LETTER

SUBJECT: Keypoint Contracting Inc. (Name of Corporation) DOCUMENT NUMBER: \$\int 100000 48202\$
DOCUMENT NUMBER: \$\int 1/00000 48202
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Amber Byrne (Name of Person)
Keypoint (ontracting Inc. (Name of Firm/Company)
104 N. 4 th St. (Address)
Leesburg H. 34748 (City/State and Zip Code)
For further information concerning this matter, please call:
Tracey Green at (352) 669-5997 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

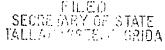
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



13 DEC -2 PH 2: 54

1, Tracey Gree	, hereby resign as_	Vice President
or Keypoint	Contracting ame of Corporation)	
P10000 48202 (Document Number, if known)	, a corporation organized und	er 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