## P11000060414

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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## **COVER LETTER**

	•
SUBJECT: Matrix Pool Constru	ction Inc
	(Name of Corporation)
DOCUMENT NUMBER: P110	00060414
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	ncerning this matter to the following:
Timothy Leatherman	
(Name of Pers	on)
Matrix Pool Construction Inc	
(Name of Firm/Co	mpany)
905 Iris Drive	
(Address)	
North FT. Myers FL, 33903	
(City/State and Zip	Code)
For further information concerning	this matter, please call:
Timothy Leatherman	at ( 239 ) 895-2521 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

l. James Ryan		, hereby resign as Director		
,		, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Title)	
	•			
of Matrix Pool Construction	on Inc			
	(Name of C	Corporation)		
P11000060414		a corporation organized unde	er the laws of the State of	
(Document Number, if know	vn)			
Florida				

(Signature of resigning difficer/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

# SEP 19 MB: III