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Amendment Section

Division of Corporations

TO:

SUBJECT: ALL CRAFTSMEN OF FLORIDA, INC (Name of Corporation) P11000087788 **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 DECLEENE (Name of Person) ALL CRAFTSMEN OF FLORIDA, INC (Name of Firm/Company) 8836 HANDEL LOOP (Address) LAND O' LAKES, FL 34637 (City/State and Zip Code) For further information concerning this matter, please call: THOMAS DECLEENE (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: **Mailing Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building Post Office Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

SECRETARY OF PAIR S3 ROBERT B. CHEYNEY VICE PRESIDENT hereby resign as (Title) ALL CRAFTSMEN OF FLORIDA, INC. (Name of Corporation) P11000087788 _, 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