

P110000087788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

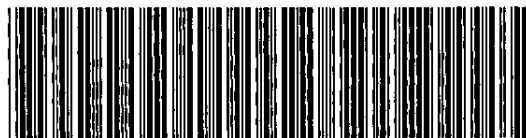
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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@ 6/14/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All Craftsmen of Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P11000087788

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

Please return all correspondence concerning this matter to the following:

Deborah L Harris

(Name of Person)

All Craftsmen of Florida, Inc

(Name of Firm/Company)

3807 Polumbo Dr

(Address)

Valrico, FL 33596

(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Harris

(Name of Person)

at (813) 310-3923

(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, Deborah L Harris, hereby resign as VP
(Title)

of 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)

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 JUN 14 PM 3:14

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