P11000102124

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COVER LETTER

Smitty's Last Resort Inc of SWFL (Name of Corporation) P11000102124 **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: Audri Graham (Name of Person) Smitty's Last Resort Inc of SWFL (Name of Firm/Company) 3580 Evans Ave (Address) Fort Myers, FL 33901 (City/State and Zip Code) For further information concerning this matter, please call: Audri Graham (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** Post Office Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Audri Graham	, hereby resign as VP
	(Title)
of Smitty's Last Resort Inc of S	SWFL
	me of Corporation)
P11000102124	, 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