## P12000048523

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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		-

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T. BROWN

## TRANSMITTAL LETTER

Name of Corporation)		
DOCUMENT NUMBER: P12000048523		
The enclosed Officer/Director Resignation for a C	Corporation	and fee are submitted for filing.
Please return all correspondence concerning this r	natter to th	e following:
Chris Shepherd		
(Name of Person)		
ICCT Corp		
(Name of Firm/Company)		
15220 NW Laidlaw Road, Suiute	e #210	
(Address)		
Portland, Oregon 97229		
(City/State and Zip Code)		
For further information concerning this matter, pl	ease call:	
Chris Shepherd at (	503	740-1749 & Daytime Telephone Number)
· (Name of Person)	(Area Code	& Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tellshame FL 22200

Tallahassee, FL 32399

Amendment Section Division of Corporations

TO:

12/18/2017

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



<sub>ı,</sub> Chris N. Shepher	, hereby resign as		
	(Title)		
INDUSTRIAL CONTROL SYSTEM INFORMATION SHARING AND ANALYSIS CENTER, INC			
(Name o	of Corporation)		
P12000048523	_, a corporation organized under the laws of the State of		
(Document Number, if known)			
Florida			

(Signature of resigning officer/director)

12/18/2012

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