

P13000068155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

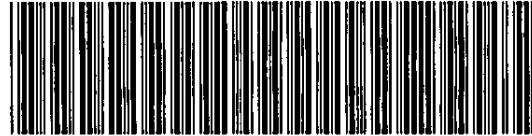
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D
ST
8/23/16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bruce's of Great Neck Inc
(Name of Corporation)

DOCUMENT NUMBER: LP

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

Please return all correspondence concerning this matter to the following:

Shirley Dubler
(Name of Person)

Bruce's of Great Neck, Inc
(Name of Firm/Company)

19575 S. STATE RD #7
(Address)

Boca Raton, FLA
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Zipes at (561) 483-2331
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Shirley Dubler, hereby resign as PRESIDENT
(Title)
of BRUCES OF GREAT NECK, INC
(Name of Corporation)
~~LBTR 2008-6800~~ a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

Shirley Dubler
(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

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