## P14000012570

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special instructions to Filing Officer:

Office Use Only



900276592019

09/03/15--01010--006 \*\*35.00

15 SEP -3 PH 3: 01

neitarpoises ap

## TRANSMITTAL LETTER

Homtronx Inc. (Name of Corporation) **DOCUMENT NUMBER:** P14000042570 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Charles Bucher (Name of Person) Hometronx Inc. (Name of Firm/Company) 10540 Greenspring Drive Tampa FL 33626 (City/State and Zip Code) For further information concerning this matter, please call: **Charles Bucher** (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section

Division of Corporations 2661 Executive Center Circle

Tallahassee, FL 32301

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>ı,</sub> John C. Bucher Jr.	, hereby resign as VP	<del></del>
of Hometronx Inc.	(Title)	
	of Corporation)	_,
P14000042570	_, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		

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