

P14000085492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

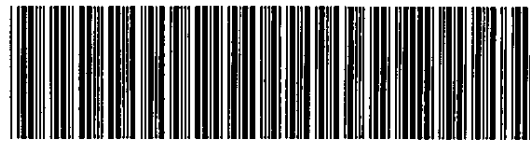
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 OCT -6 PM 1:13

OCT 11 2016

C LEWIS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACME and Associates-Removal-Christina Evans
(Name of Corporation)

DOCUMENT NUMBER: P 14000085492

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

Please return all correspondence concerning this matter to the following:

James A. Kolb
(Name of Person)

ACME and Associates
(Name of Firm/Company)

2874 Affirmed Court
(Address)

Green Cove Springs, FL 32043
(City/State and Zip Code)

For further information concerning this matter, please call:

James A. Kolb at (386) 843-2844
(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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS


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I, Christina M. Evans, hereby resign as Secretary
(Title)

of ACME and Associates,
(Name of Corporation)

P14000085492, 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