

P15000049174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

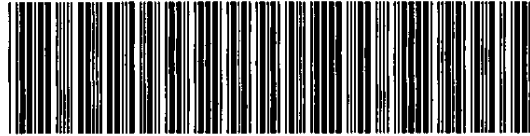
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EMMINGER FAMILY SEAFOOD, INC
(Name of Corporation)

DOCUMENT NUMBER: P15000049174

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

Please return all correspondence concerning this matter to the following:

LORAINNE ARNOLD
(Name of Person)

(Name of Firm/Company)

4036 LITTLE ROAD
(Address)

NEW PORT RICHEY FL 34655
(City/State and Zip Code)

For further information concerning this matter, please call:

JIM EMMINGER at (727) 841-0841
(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

15 OCT - 9 PM 5:22

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LORAINNE ARNOLD, hereby resign as DIRECTOR
(Title)

of EMMINGER FAMILY SEAFOOD, INC
(Name of Corporation)

P15000049174, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Lorraine Arnold
Lorraine Arnold (Oct 6, 2015)

(Signature of resigning officer/director)

Oct 6, 2015

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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