

P15 000085937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

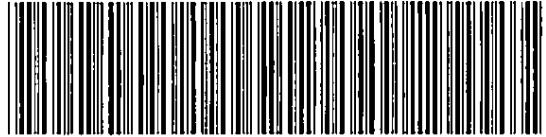
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SUB. & AFFIDAVIT  
TALLAHASSEE, FL

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PBIW, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P15000085937

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

Please return all correspondence concerning this matter to the following:

Frank J. Johnson S/T  
(Name of Person)

PBIW, Inc.  
(Name of Firm/Company)

316 Glenwood Road  
(Address)

DeLand, FL 32720  
(City/State and Zip Code)

For further information concerning this matter, please call:

Frank J Johnson at ( 386-414-038 )  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

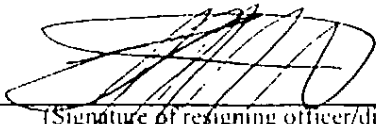
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2024 FEB -2 AM 9:46  
CLERK OF COURT  
TALLAHASSEE, FL

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Frank J Johnson, hereby resign as Secretary, Treasurer  
(Title)

of PBHW, Inc.  
(Name of Corporation)

P15000085937, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida  
\_\_\_\_\_

  
\_\_\_\_\_  
(Signature of resigning officer/director)  
Frank J. Johnson

**FILED**  
2024 FEB -2 AM 9:46  
TALLAHASSEE, FL  
DEPARTMENT OF STATE

**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