P14600033157

(Re	questor's Name)				
(Address)					
(Address)					
(Cir	ty/State/Zip/Phone				
(Oil	tyrotaterzipii ilone	- 11)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
					
(Document Number)					
Certified Copies	Certificates	s of Status			
	_				
Special Instructions to	Filing Officer:				
·	·				
L.					

Office Use Only



05/31/16--01009--013 **35.00



01/25

JUN 02 2016

I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Beeman Construction Inc (Name of Corporation)
DOCUMENT NUMBER: P160000 33157
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Beeman Construction Inc (Name of Firm/Company)
2755 College St (Address)
Jacksonville, FL 32205 (City/State and Zip Code)
For further information concerning this matter, please call:
Joseph M. Beeman at (407) 924-3984 (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

1, Jonathan V	Beeman	, hereby resign a	s	(Title)
of Beeman G	(Name of Corp			·
Pl60003315 (Document Number, if k		orporation organized	under the laws of	the State of
Florida	···································			
	Sau Ha (Signatur	n Villanan e of resigning officer/dia	ector)	
				7 O
				2:3

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314