## P17 000045470

(Requestor's Name)	
(Address)	60035
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	12/14/2
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	, <del>-</del>
Special Instructions to Filing Officer:	Jaii
Office Use Only	11 Resigns
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## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations		•	;	
	ECT: RYAN AND SONS		Construction)	Hon	Inc.
DOCU	iment number: <u>P1700</u> 004	5470			
The en	nclosed Officer/Director Resignation for	a Corporation	and fee are su	bmitted	for filing.
Please	return all correspondence concerning th	is matter to th	e following:		
	JAMES M. RYAN J. (Name of Person)	ζ			
RYAN	SAND SANS S STAR (INSTRU (Name of Firm/Company)	rnon			,
	5268 DVNCAN RD (Address)				
<u> </u>	ONTA GOLDA FI 33982 (City/State and Zip Code)				
For fu	rther information concerning this matter	, please call:			
	NECOLE RYAN (Name of Person)	at ((Area Code	585 592 & Daytime Te	3 lephone N	lumber)
Enclos	sed is a check for \$35.00 made payable t	to the Florida	Department of	State.	
	Mailing Address: Amendment Section	Street Ac Amenda	Idress: ment Section		

**Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

100

I, JAMES M. RYAN JR, hereby resign as DIRECTOR	itle)					
of RYAU AND SINS 5 STAR CONSTRUCTION INC.	ue)					
(Name of Corporation)						
(Document Number, if known), a corporation organized under the laws of the	State of					
Florina.						
(Signature of resigning officer/director)						
	279					
	737A DEC 14					
	1					

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