(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



700304139787

10/10/17--01083--016 **85.00

nCT 11 7017



TRANSMITTAL LETTER

SUBJECT: Jabot Enterprises, Inc. (Name of Corporation) DOCUMENT NUMBER: P17000050943 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Shelli Moore (Name of Person) Jabot Enterprises, Inc. (Name of Firm/Company) 700 Transmitter Rd. (Address) Panama City, FL. 32405 (City/State and Zip Code) For further information concerning this matter, please call: Shelli Moore (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations 2661 Executive Center Circle P.O. Box 6327

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{ı.} Shelli Moore	, hereby resign as
	(Title)
_{of} Jabot Enterprises,	Inc.
(Name	e of Corporation)
P17000050943 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	·
Shel	li Moore
((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

Printed Name Of Notary

Affidavit

I, Shelli Moore do state that the spelling of my name on the provided Florida Profit Corporation document is in fact misspelled. (Shellie Moore)

Shuimoore		
Shelli Moore		
STATE OF FLORIDA		
COUNTY OF Day		
Sworn to (or affirmed) and subscribed befor Shelli Moor	re me this 3 ^{cd} day of	:
personally known to me or produced	as	;
identification.		
(Seal)	11-th . D. L. 1	
	- #11 110111 1 1 1 1 1 1 1 1 1 1 1 1 1 1	X.

NATALIE RICHARDSON Commission # FF 168458 Expires November 1, 2018 Booked Titru Trey Fam Islaurance 800-385-7019