

P17000051040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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FALL MASSACHUSETTS

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Daniel McGraw, PA  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P17000051040  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Daniel McGraw  
\_\_\_\_\_  
(Name of Person)

Daniel McGraw, PA  
\_\_\_\_\_  
(Name of Firm/Company)

915 N. Franklin Street Unit 2108  
\_\_\_\_\_  
(Address)

Tampa, Florida 33602  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel McGraw at (352) 345-0642  
\_\_\_\_\_  
(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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

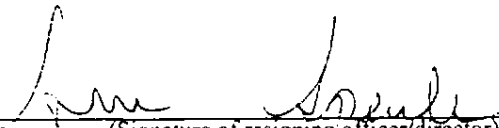
2022 JAN 20 AM 10:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Aimee Speciale, hereby resign as VP  
(Title)

Daniel McGraw, PA  
of \_\_\_\_\_  
(Name of Corporation)

P17000051040, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida  
\_\_\_\_\_

  
(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