

P1700000 99048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

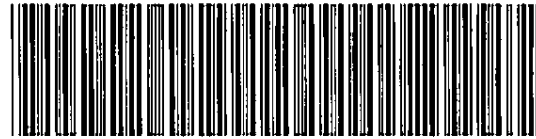
(Business Entity Name)

(Document Number)

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GM
3/17/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Resignation/Removal of Officer

(Name of Corporation)

DOCUMENT NUMBER: P17000099048

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

Please return all correspondence concerning this matter to the following:

Dara A. Davis

(Name of Person)

Quality Drywall Construction of Jax, Inc.

(Name of Firm/Company)

10033 Sawgrass Dr W Ste 124

(Address)

Ponte Vedra Beach, Florida 32082

(City/State and Zip Code)

For further information concerning this matter, please call:

Dara A. Davis

904 305-7651

(Name of Person)

at (_____) _____
(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**

I, Dara A. Davis, hereby resign as COO
(Title)

of Quality Drywall Construction of Jax, Inc.
(Name of Corporation)

P17000099048, 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

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DIVISION OF CORPORATIONS
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