

P93000019370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only



500043887945

Resignation

of
officer

01/06/05--01001-833 **245.00

FILED
JAN -5 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJR
11-6-05

SPIEGEL & UTRERA, P.A.

(Requestor's Name)

1840 CORAL WAY, 4TH FLOOR

(Address)

MIAMI, FL 33145 (305) 854-6000

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Alpine Aluminum & Screen Construction, Inc
(Corporation Name) (Document #)
2. _____ P9000019370
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALPINE ALUMINUM & SCREEN CONSTRUCTION, INC.
(Name of Corporation)

DOCUMENT NUMBER: P93000019370

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

Please return all correspondence concerning this matter to the following:

TIMOTHY K. MCALPIN, PRES.
(Name of Person)

ALPINE ALUMINUM & SCREEN CONSTRUCTION, INC.
(Name of Firm/Company)

PO Box 939
(Address)

OLDSMAR FL 34677
(City/State and Zip Code)

For further information concerning this matter, please call:

Tim McAlpin at (813) 854-4787
(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
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED
05 JAN -5 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JUDITH MCALPIN, hereby resign as Vice President, Treasurer, Secretary
(Title)

of ALPINE ALUMINUM & SCREEN CONSTRUCTION, INC.
(Name of Corporation)

P93000019370, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X *Judith McAlpin*
(Signature of resigning officer/director)

X *Janice M. Kersey*
Witness

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