

P93000043229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

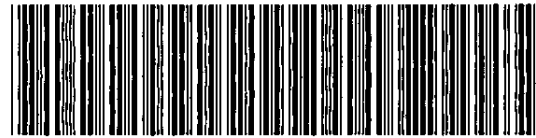
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600274798356

07/31/15--01003--004 **35.00

*Resignation of
Officer*

FILED
2015 JUL 31 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
15 JUL 31 AM 11:04
DIVISION OF CORPORATION

AUG 03 2015
A RAMSEY

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Thomas Howell Ferguson, P.A.

(Name of Corporation)

DOCUMENT NUMBER: P93000043229

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

Please return all correspondence concerning this matter to the following:

Winston K. Howell

(Name of Person)

Thomas Howell Ferguson, P.A.

(Name of Firm/Company)

2615 Centennial Blvd Suite 200

(Address)

Tallahassee, FL 32308

(City/State and Zip Code)

For further information concerning this matter, please call:

Winston K. Howell

(Name of Person)

at 850 668-8100

(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2015 JUL 31 AM 11:28

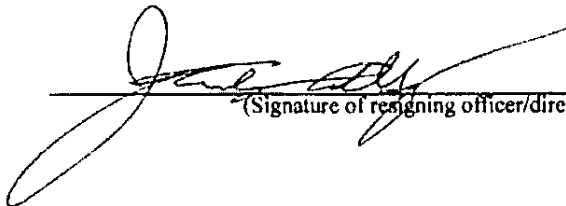
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, James A. Gray, hereby resign as Director
(Title)

of Thomas Howell Ferguson, P.A.
(Name of Corporation)

P93000043229, 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