

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Name	e)
(Doc	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





02/25/13--01009--004 **157.50

TRANSMITTAL LETTER

Ą

TO: Amendment Section Division of Corporations

SUBJECT: Product Testing, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P9300078151
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Beth Prophet
(Name of Person)
N/A
(Name of Firm/Company)
6557 Harmon Hills Circle
(Address)
Jacksonville, FL 32222
(City/State and Zip Code)
For further information concerning this matter, please call:
Beth Prophet _{at (} 904)672-6342
(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



, Scott K Prophet	Vice President and Director
7	(Title)
of Product Testing, In	C.
(Name	of Corporation)
P93000078151 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314