P94000026375

(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:				





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SECRETARY OF STATE

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: G A Miller, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P94000026375
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Gler	A Miller
	(Name of Person)
G A	Miller, Inc. (Name of Firm/Company)
	(Name of Firm/Company)
2753	3 Vista Parkway, J8
	(Address)
Wes	t Palm Beach, FL 33411
	(City/State and Zip Code)
For fi	arther information concerning this matter, please call:
Glen	A Miller at (561) 684-7317 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations on Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Mary Katherine Miller	, hereby resign as Director	
7)		(Title)
of G A Miller, Inc.		,
(Nam	e of Corporation)	
P9400026375 (Document Number, if known)	, a corporation organized under the law	s of the State of
Florida	<u></u> .	
~ -		
_Mar	(Signature of resigning officer/director)	09 SECH ALL/
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		SEE OF
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		M IO: 4.1 FLORIDA

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

FILING FEE IS \$35.00

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