## -P94000065325

(Re	questor's Name)			
(Ad	dress)			
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(Cit	ty/State/Zip/Phone	n #1)		
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
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(Do	ocument Number)			
, (DC	oument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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FILED

2010 JUN 21 AM 9: 31

SECRETARY OF STATE

off. Resign.

TF

JUN 22 2010

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Jay - By Tuc. (Name of Corporation)
DOCUMENT NUMBER: 19400065335
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Charles Coker (Name of Person)
(Name of Firm/Company)
690 E. Rhole JEI. Ane.
Orange City/State and Zip Code)
For further information concerning this matter, please call:
Charles Coker at 384, 804, 9470 (Name of Person) (Area Code & Daytime Telephone Number)
(Then could be buy mile I depicte I democr)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Bryan Coker	, hereby resign as_	Secretary (Title)	<del>\</del>
	f Corporation)		,
(Document Number, if known)	_a corporation organized uno	der the laws of the State	e of
Florida	e.	1	rad
Propries	gnature of resigning officer/director	ALLAHASSEE, FLORIU	FILED M 9:31

## 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