PGSCOOTTS 45 Requester's Name Address City/State/Zip Phone

Office Use Only

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

| | | 80000 <u>458795</u> 8——4 |
|----------|--|---|
| 1 | (Corporation Name) | (Document #) -03/14/0101008001 ****157.50 *****35.00 |
| 2 | (Corporation Name) | (Document #) |
| 3 | (Corporation Name) | (Document #) AHARY ASSET ARRY SEP 3 |
| 4 | (Corporation Name) Walk in Pick up time Mail out Will wait | (Document #) Certified Control Photocopy Certificate of Status |
| | Profit Not for Profit Limited Liability Domestication Other | Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger |
| <u>(</u> | Annual Report Fictitious Name | REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other |

Examiner's Initials

FILED

OI SEP 13 PM 3: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION

| I, R. VICTOR SEAMAN, hereby resign as SECRETARY (Title) | | | |
|--|--|--|--|
| of AKERS & ASSOCIATES CONSTRUCTION, INC. (Name of Corporation) | | | |
| a corporation organized under the laws of the State of FLORIDA | | | |
| and affirm that the corporation has been notified in writing of the resignation. | | | |
| Frui- | | | |
| (Signature of resigning officer/director) | | | |

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314