

P960000080121

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(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MILL FORK, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P96000080121

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

Please return all correspondence concerning this matter to the following:

RHODA JAVIER

(Name of Person)

MILL FORK, INC

(Name of Firm/Company)

PO BOX 8089

(Address)

PORT ST LUCIE, FL 34985

(City/State and Zip Code)

For further information concerning this matter, please call:

RHODA JAVIER

(Name of Person)

at ( 772 ) 223-2959

(Area Code & Daytime Telephone Number)

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**

I, RHODA JAVIER, hereby resign as DIRECTOR  
(Title)

of MILL FORK, INC  
(Name of Corporation)

P96000080121, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 AUG 23 AM 9:54

**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