## P96000101090

| (Re                     | equestor's Name)   |  |
|-------------------------|--------------------|--|
| (Ad                     | ldress)            | ······································ |
| (Ad                     | ldress)            |  |
| (Cit                    | ty/State/Zip/Phone | e #)                                   |
| PICK-UP                 | ☐ WAIT             | MAIL                                   |
| ·                       | siness Entity Nan  | 20)                                    |
| . uu                    | Siness Emily Nan   |  |
| (Document Number)       |                    |  |
| Certified Copies        | _ Certificates     | of Status                              |
| Special Instructions to | Filing Officer:    |  |
|                         |                    |  |
|                         |                    |  |
|                         |                    |  |
|                         |                    |  |

Office Use Only



500105721425

07/09/07--01038--012 \*\*105.00

07 JUL -9 AM 9: 16
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

W PW

## **COVER LETTER**

| TO:                                 | Amendment Section Division of Corporations   |
|-------------------------------------|--|
| SUBJ                                | JECT: PREFERRED PARTNERS, INC.   |
|                                     | (Name of Corporation)  |
| DOC                                 | UMENT NUMBER: P96000101090   |
| 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:   |
| MAF                                 | RK A. VIOLETTE   |
|                                     | (Name of Person)   |
| MAF                                 | RK A. VIOLETTE, P.A.   |
|                                     | (Name of Firm/Company)   |
| 42 B                                | BUSINESS CENTRE DRIVE, SUITE 311   |
|                                     | (Address)  |
| MIR                                 | AMAR BEACH, FLORIDA 32550  |
| -                                   | (City/State and Zip Code)  |
| For fu                              | orther information concerning this matter, please call:  |
| MAR                                 | (Name of Person) at ( 850 ) 269-7474 (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.  |
| Amen<br>Divisi<br>Cliftor<br>2661 I | Mailing Address:  Idment Section Idm |

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I,ED KIRKLAND                            | hereby resign as Vice-President/Director (Title)                |
|--|---|
| of PREFERRED PARTNERS, I                 | NC.   |
| P96000101090 (Document Number, if known) | , a corporation organized under the laws of the State of        |
| FLORIDA                                  |   |
| Euf                                      | SECHIL INITY OF STATE (Signature of resigning officer/director) |

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