

P970000014160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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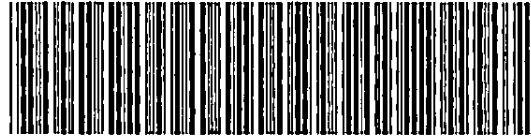
(Business Entity Name)

(Document Number)

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2022 APR 25 AM 10:07  
STATE  
TALLAHASSEE, FL

cf 6/12/2022

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: James C. Boyd Funeral Home, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P97000014160

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

Please return all correspondence concerning this matter to the following:

Walter R Boyd  
(Name of Person)

James C. Boyd Funeral Home  
(Name of Firm/Company)

2324 Sistrunk Boulevard  
(Address)

Fort Lauderdale, FL 33311  
(City/State and Zip Code)

For further information concerning this matter, please call:

Avis Boyd-Gaines at (954) 584-3940  
(Name of Person) (Area Code & Daytime Telephone Number)

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

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Walter R. Boyd, hereby resign as Vice-President  
(Title)

of James C. Boyd Funeral Home, Inc.  
(Name of Corporation)

P97000014160, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Walter R. Boyd  
(Signature of resigning officer/director)

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TALLAHASSEE, FL

**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