

CAROL ANN VOLINI, P.A.
Attorney at Law
44 S.E. First Avenue
Suite 303
Ocala, Florida 34471

City/State/Zip

Phone #

Office Use Only

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

P97000026176

(Corporation Name)

(Document #)

2.

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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 AUG 13 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HH Res

8-21-97

RESIGNATION OF A DIRECTOR/VICE PRESIDENT

Pursuant to Florida Statute Section 607.0807 of the Florida Business Corporation Act (1991), I wish to render my resignation as Director/Vice President and I am resigning any association or ownership of the corporation known as **COMPUQUEST MOBILE COMPUTER SERVICES, INC.** as of the date of the signing of this document.

As of the date of the signing of this document, I no longer have any financial or corporate involvement with **COMPUQUEST MOBILE COMPUTER SERVICES, INC..**

Dated: July 21, 1997


DAVID E. BARBER
Director/Vice President


Witness



Witness

STATE OF FLORIDA:
COUNTY OF MARION:

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared DAVID E. BARBER, known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he/she executed the same, that I relied upon the following form(s) of identification of the above-named persons: drivers license or personally known and that an oath (was) taken. Witness my hand and official seal in the county and State last aforesaid this 21st day of July, A.D. 1997.



RENA L. DAVITTO
My Commission CC479507
Expires Jul. 11, 1999
Bonded by HAI
800-422-1655


Notary Signature

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97 AUG 13 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA