## Requester's Name Address Address City/State/Zip Phone # Corporation Name(s) & Document Number(s), (if known): 1.

1.	
(Corporation Name)	(Document #)  1000046944012 -11/27/0101020001
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
☐ Walk in ☐ ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

## 

01 NOV 26 PM 12: 52

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## OFFICER / DIRECTOR RESIGNATION

I, JANKETTE HOCKING, hereby resign as DIRECTON DRESIDENT
of HERNANDO CABINET & DESIGN CENTER, FIC., (Name of Corporation) D9900000 6987
a corporation organized under the laws of the State of
and affirm that the corporation has been notified in writing of the resignation.
× January 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