

P990000 10599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

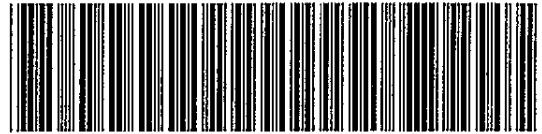
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/06/04 --01040--002 **35.00

resignation
of
officer

FILED
04 DEC -6 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
12/10/04

JAMES W. SEARS, P.A.
ATTORNEY AT LAW
511 NORTH FERNCREEK AVENUE
ORLANDO, FLORIDA 32803
(407) 896-9068

JAMES W. SEARS
CERTIFIED MEDIATOR

December 3, 2004

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

Attention: Thelma Lewis, Document Specialist Supervisor

Re: Motes, Shaw, Sears, Sturgess & Williams, P.A.

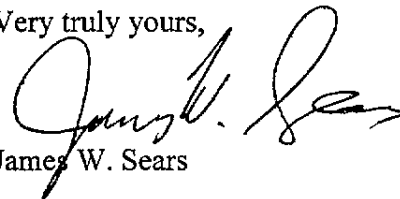
Dear Ms. Lewis:

Enclosed are the following:

1. Transmittal Letter.
2. Officer/Director Resignation For A Corporation regarding my resignation from all positions with Motes, Shaw, Sears, Sturgess & Williams, P.A. effective on Sunday, November 7, 2004 at 11:59 p.m.
3. Check number 17260 for \$35.00 for the filing fee.

Please change your records accordingly.

Very truly yours,



James W. Sears

/jws
Enclosure

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NOTES, SHAW, SEARS, STURGES & WILLIAMS, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P99000010599

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

Please return all correspondence concerning this matter to the following:

JAMES W. SEARS
(Name of Person)

JAMES W. SEARS, P.A.
(Name of Firm/Company)

511 N. FERNCREEK AVE.
(Address)

ORLANDO, FL 32803
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES W. SEARS at (407) 896-9068
(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

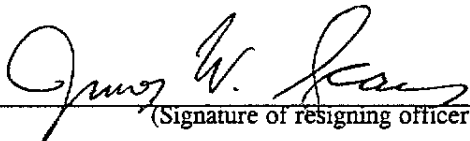
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
04 DEC -6 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JAMES W. SEARS, hereby resign as ALL POSITIONS
(VICE PRESIDENT, SECRETARY/TREASURER AND DIRECTOR) (Title)
of NOTES, SHAW, SEARS, STURGES & WILLIAMS, P.A.
(Name of Corporation)

999000010599, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.


(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