P9900033204

(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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JAN 0 4 2019 S. YOUNG

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Powell, Powell & Powell, P.A.

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(Name of Corporation)

DOCUMENT NUMBER: P99000033204

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

Please return all correspondence concerning this matter to the following:

Gillis E. Powell, Jr.

(Name of Person)

Powell, Powell & Powell, P.A.

(Name of Firm/Company)

P.O. Box 277

(Address)

Crestview, FL 32536

(City/State and Zip Code)

For further information concerning this matter, please call:

Lyla Peacock

(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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Lacey Powell Clark	Secre , hereby resign as	etary, Treasurer, and Director
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Title)
of Powell, Powell & Po		
P99000033204	Corporation) a corporation organized under (the laws of the State of
Florida		
0~ 10	ature of resigning officer/director)	FILE 16 DEC 20 SELAHASSE
FIL	ING FEE IS \$35.00	ED MIT: 20

Make checks payable to Florida Department of State and mail to:

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