

P99000035605

William G. Povlitz, Esquire  
1207 Third Street South, Suite 5  
Naples, Florida 34102

City/State/Zip

Phone #

Office Use Only

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

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

| 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 checked="" type="checkbox"/> | Resignation of R. C., Officer/ Director |
| <input type="checkbox"/>            | Change of Registered Agent              |
| <input type="checkbox"/>            | Dissolution/Withdrawal                  |
| <input type="checkbox"/>            | Merger                                  |

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-08/09/99--01110--020  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

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

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

FILED  
99 AUG -9 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. LEWIS AUG 13 1999

## OFFICER / DIRECTOR RESIGNATION

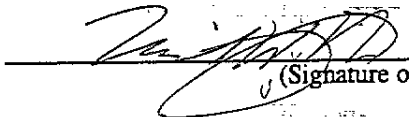
FILED  
99 AUG - 9 PM 1:01  
TALLAHASSEE, FL  
SECRETARY OF STATE

I, Micah Wells, hereby resign as President  
(Title)

of Micah & Company, Inc.  
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation. effective 7/17/99.

  
(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**