

P99000038628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

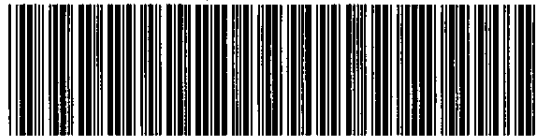
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700140318957

01/16/09--01034--006 **35.00

FILED
2009 JAN 16 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation

TB

1-23-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ENCON INTERNATIONAL, INC.

(Name of Corporation)

DOCUMENT NUMBER: P99000038628

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

Please return all correspondence concerning this matter to the following:

JOHN W. PRIEST

(Name of Person)

ENCON INTERNATIONAL, INC.

(Name of Firm/Company)

1564 TRAVERTINE TERRACE

(Address)

SANFORD, FL 32771

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN W. PRIEST

(Name of Person)

at (407) 322-6468

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

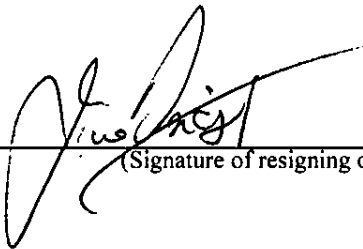
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOHN W. PRIEST, hereby resign as DIRECTOR
(Title)

of ENCON INTERNATIONAL, INC.
(Name of Corporation)

P99000038628, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.


(Signature of resigning officer/director)

01/12/09

FILED
2009 JAN 16 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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