

P99000040002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

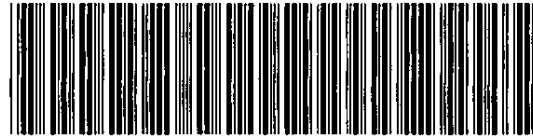
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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OPR/KRC
7/1/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vernon and Vernon PA
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Thanea Vernon
(Name of Person)

Vernon + Vernon P.A.
(Name of Firm/Company)

475 Bridgewood Rd
(Address)

Key Biscayne, FL 33149
(City/State and Zip Code)

For further information concerning this matter, please call:

Thanea Vernon at (305) 582-3761
(Name of Person) (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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2009

THANIA VERNON
475 RIDGEWOOD ROAD
KEY BISCAVNE, FL 33149

SUBJECT: VERNON & VERNON, P.A.
Ref. Number: P99000040002

We have received your document for VERNON & VERNON, P.A. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

To file a resignation as an officer or director with this office, the enclosed form should be completed and returned with a filing fee of \$35 per person resigning.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

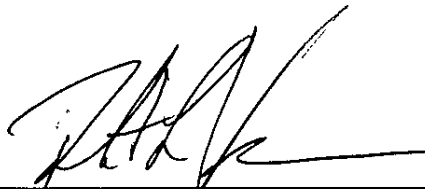
Letter Number: 709A00019731

RECEIVED
2009 JUN 22 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Robert Vernon, hereby resign as VP, Secretary, Treasurer
(Title)
of Vernon, & Vernon PA
(Name of Corporation)

_____, 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

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