P99000048142

JOB PERFORMANCE ASSOCAITES, INC. P.O. BOX 440564 JACKSONVILLE, FL 32222-0564				
·				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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SECRETARY OF STATE DIVISION OF CORPORATIONS
7003 SEP | | PM L: 30

010 Resign.
09/16/05

TRANSMITTAL LETTER

	Amendment Section Division of Corporations	-	
SUBJE	ct: Job Perform	navce Asso me of Corporation)	Inc
DOCUN	ment number: <u>999000</u>	C41840C	
The encl	osed Officer/Director Resignation for a	Corporation and fee are subr	nitted for filing
Please re	eturn all correspondence concerning this	matter to the following:	
le	lendy Waters (Name of Person)	7.	<u></u>
Job	Performance ASS (Name of Firm/Company)	o The	is.
09	Rox 440564 (Address)		. طيفة
Jac	CkSonuille FL 300 (City/State and Zip Code)	- 4.	
For furth	er information concerning this matter, p	olease call:	
70	end (Name of Person) at	($\frac{904}{}$) $\frac{178-75}{}$ (Area Code & Daytime Telep	k30 hone 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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I Michael A. L	eigh hereby resign	as Vice President
,	_	(Title)
or Joh Perform	arce Asson	ciates, Inc.
(Nan	ne of Corporation)	- -
(Document Number, if known)	, a corporation organized	under the laws of the State of
(Document Number, it known)	, -	.÷
tlorida		•

(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

2003 SEP | | PM |: 20