

P99000086036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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12/12
AC. 11/12/02

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MP ENTERPRISES OF NORTH FLORIDA, INC.

(Name of Corporation)

DOCUMENT NUMBER: P99000086036

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

Please return all correspondence concerning this matter to the following:

MICHAEL PUKYLO

(Name of Person)

MP ENTERPRISES OF NORTH FLORIDA, INC.

(Name of Firm/Company)

1124 SW 115 STREET

(Address)

GAINESVILLE, FL 32607

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL PUKYLO

(Name of Person)

at (352) 317-1611

(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
409 E. Gaines Street
Tallahassee, FL 32399

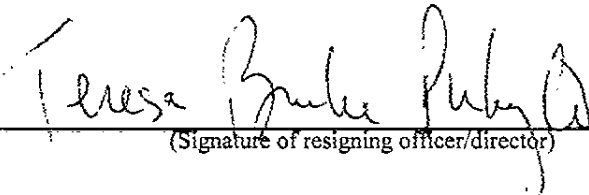
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, TERESA BURKE PUKYLO, hereby resign as DIRECTOR
(Title)

of MP ENTERPRISES OF NORTH FLORIDA, INC.
(Name of Corporation)

P99000086036, 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

FILED
02 DEC -5 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA