## P99000110708

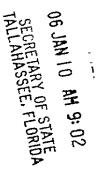
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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01/10/06--01014--008 \*\*35.00 ....





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Amison Seafond, INC. (Name of Corporation)	1-9.06
DOCUMENT NUMBER: P9000110708	.=
The enclosed Officer/Director Resignation for a Corporation and fee are submitted	for filing.
Please return all correspondence concerning this matter to the following:	
James T. Amison (Name of Person)	
Amison Seafood, INC. (Name of Firm/Company)	
P.O.Box 627 (Address)	* *
Apalachicolo, H. 32329-0621 (City/State and Zip Code)	. –
For further information concerning this matter, please call:	
Tomes T. Amison of Auf Amison (850) 653-8340 (Name of Person) (Area Code & Daytime Telephone N	lumber)

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

1. Loun i Lawy to	f \\ W 1110	, hereby resign as_	Treasure	LR.	e s
" from a gasea p	начер	, 110100 , 1001811 110_		(Title)	*
of Amison	Seafood	JUC.		1-9-06.	
$\mathcal{D}$	(Name of Corporation	n)/ -			- :
(Document Number, if known)	, a corpor	ation organized un	der the laws of	the State of	
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F101100					
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				SEC	n ==
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	Jana i	Mujerin		SS	0 5
	(Signature of p	esigning officer/direct	or)	- Fg	至
	0			FLOS	9.0
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## 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