

V08517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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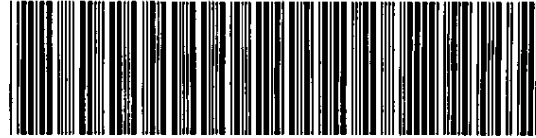
(Business Entity Name)

(Document Number)

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14 DEC -3 PM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO

DEC 10 2014
T. LEMMON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 3 D PL INC
(Name of Corporation)

DOCUMENT NUMBER: V08517

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

Please return all correspondence concerning this matter to the following:

M. MILLMAN
(Name of Person)

3 D PL INC
(Name of Firm/Company)

8501 W MISS MAGGIE DR
(Address)

HOMOSASSA FL 34448
(City/State and Zip Code)

For further information concerning this matter, please call:

JA FLOREDOGG at (352) 688-8619
(Name of Person) (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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DONALD C MILLIMAN, hereby resign as VPD
(Title)

of 3 D P L INC,
(Name of Corporation)

V08517, 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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TALLAHASSEE, FLORIDA

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