

J58096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

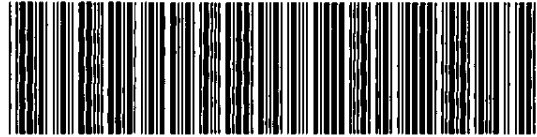
(Business Entity Name)

(Document Number)

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*Resignation
of officer*

FILED
2010 FEB 12 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*ASE
2/15/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PARRAMORE'S Camp Inc.
(Name of Corporation)

DOCUMENT NUMBER: J58096

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

Please return all correspondence concerning this matter to the following:

LORI E. BURICH
(Name of Person)

PARRAMORE'S Camp Inc.
(Name of Firm/Company)

PO Box 39
(Address)

ASTOR FL 32102
(City/State and Zip Code)

For further information concerning this matter, please call:

LORI E. BURICH at (386) 749-2721
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2010 FEB 12 PM 12:43

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Beva C. Weller, hereby resign as Sec/Treas.
(Title)

of PARRAMORE'S CAMP INC.
(Name of Corporation)

J58096, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.

Beva C. Weller
(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