P05000031394

(Re	equestor's Name)						
(Ac	ldress)						
(Ac	ldress)						
(Ci	ty/State/Zip/Phone	e #)					
PICK-UP	☐ WAIT	MAIL					
(Bi	isiness Entity Nar	ne)					
(Document Number)							
Certified Copies	_ Certificates	s of Status					
Special Instructions to Filing Officer:							
		}					
		}					

Office Use Only



300050663833

04/18/05--01060--004 **35.00

FILED

05 APR 18 PH 3: 43

SECRETARY OF STATE
TALLAHASSELF, FLORIE



1.5mm APR 25 7455

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Pool Contractors, INC. (Name of Corporation)
DOCUMENT NUMBER: POSCOCO 31394
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Torrest R. Lee (Name of Person)
(Name of Person)
Fool Contractors, INC. (Name of Firm/Company)
5904 Bob Head Rd.
Plant City FL 33565 (City State and Zip Code)
For further information concerning this matter, please call:
Hendrik (De Wet at (813) 376 6529 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$25.00 made payable to the Floride Department of State

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

l, _	Forrest	R.	Lee		, hereby resig	gn as	Directi	(Title)		
of_	Pool	Cor	nt ract (Nar	OFS T	_NC ·				,	
	(Document Nu	mber, if	known)	, a corp	ooration organiz	ed unde	r the laws o	f the State o	f	
	FLORIDA	٩		······································						
			Jan	(Signature	C Z	/director		TALLAHASSEE, FLORID	05 APR 18 PH 3: 43	

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314