

POS000071639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

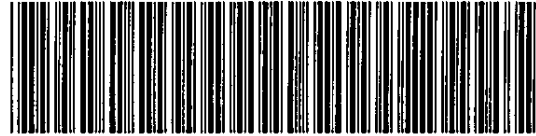
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 10/30/06
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All American Pool Safety Fence
(Name of Corporation)

DOCUMENT NUMBER: 705000071639

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

Please return all correspondence concerning this matter to the following:

Constance Leone
(Name of Person)

All American Pool Safety Fence Co.
(Name of Firm/Company)

18957 SE Lochatchee River Road
(Address)

Jupiter FL 33458
(City/State and Zip Code)

For further information concerning this matter, please call:

Nicholas P. Leone at (561) 676-6744
(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

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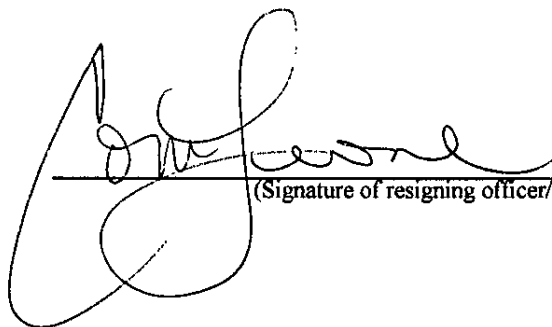
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Constance Leone, hereby resign as Director
(Title)

of All American Pool Safety Fence Company
(Name of Corporation)

POS000071639, 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