

P10000005553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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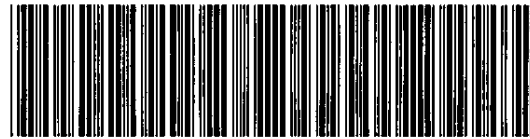
(Business Entity Name)

(Document Number)

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JUL 02 2014

C. CARROTHERS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LEXICO ENTERPRISES INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000005553

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

Please return all correspondence concerning this matter to the following:

NANCY GLASGOW  
(Name of Person)

LEXICO ENTERPRISES INC  
(Name of Firm/Company)

15885 87 RD. N  
(Address)

LOXAHATCHEE, FL 33470  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nancy Glasgow at ( 561 ) 784-0964  
(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

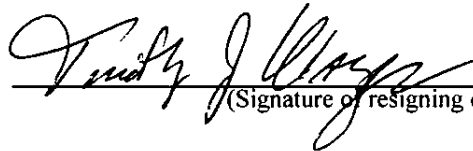
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, TIMOTHY J. GLASGOW, hereby resign as President  
(Title)

of LEXICO ENTERPRISES INC  
(Name of Corporation)

P10000005553, 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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14 JUN 18 PM 1:27  
TALLAHASSEE, FLORIDA