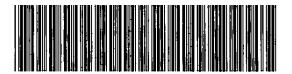
## 712000078723

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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: PAVERS PROFESSIONAL INC

(Name of Corporation)

DOCUMENT NUMBER: P 12000078723

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

Please return all correspondence concerning this matter to the following:

## **LUCIMAR VILARINO MUSCH**

(Name of Person)

LM ACCOUNTING & PAYROLL SERVICES LLC

(Name of Firm/Company)

4241 BAYMEADOWS RD, SUITE 4

(Address)

JACKSONVILLE, FL 32217

(City/State and Zip Code)

For further information concerning this matter, please call:

LUCIMAR VILARINO MUSCH

,,904 \410-834

(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

🛋 , 🦂

JESSICA ALBERTA OLIVEIRA ASSEMANY	hereby resign as	SV
?	, nordely resign as	(Title)
of PAVERS PROFESSION		
P12000078723  (Document Number, if known)	orporation organized under	the laws of the State of
FLORIDA		
		<b>→</b>
Jessica Albert (Signatu	ta Olivera Assema	SECRETARY ALLAHASSI
<b>,</b> ( <b>,</b> ( <b>, , , , , , , , , ,</b>	,	RY OF SSEE.FI
		LORID.

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