458436

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(C	ity/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(D	ocument Number)	
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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C. LEIGHES 2014



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 20, 2014

JOAN MANGES 1149 CAMINO DEL VIENTOS MARATHON, FL 33050 US

SUBJECT: LILCO, INC. Ref. Number: 458436

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 114A00013465

RECEIVED

14 JUL -3 AM IO: 13

DEPARTMENT OF STATE
DIVISION OF CORPORATION

6/09

JOAN MANGES

1149 Camino Del Vientos Marathon Fl. 33050 305 743 6078 & Fax 305 395 1188 Cell

July 1, 2014

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee Fl. 32314

Re: Letter Number: 114A00013465

Resignation

Dear Carolyn Lewis, Regulatory Specialist II

Please be advised I wish to resign as Officer/Director from the "LILCO INC".

Enclosed find copy of TRANSMITTLE LETTER.

Enclosed find copy of your letter June 20, 2014 requesting this letter of resignation. Acknowledging receipt of my check #6741 to cover the required filing fee \$35.00, deposited to your account June 9, 2014. Copy of front and back of deposited check reprinted below.

Thank you for your attention to this request.

Sincerely

Joan Manges

JOAN MANGES MILTON MANGES	·	04-70H/28F2	6741
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: LILCO Inc	(Name of Corporation)
DOCUMENT NUMBER: 458	• • •
	signation for a Corporation and fee are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
Joan Manges	
(Name of Pe	erson)
(Name of Firm/	Company)
1149 Camino De	
(Address	s)
Marathon, FL 3	3050
(City/State and Z	Zip Code)
For further information concerning	g this matter, please call:
Joan Manges	_{at (} 305)743-6078
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade payable to the Florida Department of State. 井 ら マ 41 (6) 14
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

SECRETARY OF STATE DIVISION OF CORPORATIONS

14 JUN 23 AM 8: 17

_{ı,} Joan Manges	, hereby resign as Director
	(Title)
_{of} LILCO Inc.	
	(Name of Corporation)
458436 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	

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