

723964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

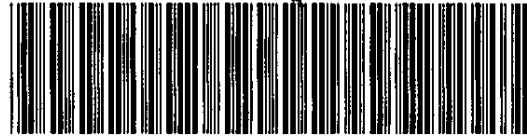
(Business Entity Name)

(Document Number)

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1-11-13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Silver Pines No. 1, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 723964

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

Please return all correspondence concerning this matter to the following:

Jeanette Schnorrenberg
(Name of Person)

Silver Pines No. 1, Inc.
(Name of Firm/Company)

1640 NE 40th Avenue
(Address)

Ocala, FL , 34470
(City/State and Zip Code)

For further information concerning this matter, please call:

Luanne Littlepage RA at (727) 967-9008
(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
409 E. Gaines Street
Tallahassee, FL 32399

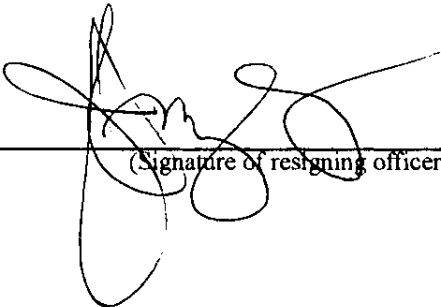
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
13 JAN -9 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Jeanette Schnorrenberg, hereby resign as Treasurer
(Title)

of Silver Pines No. 1, Inc.
(Name of Corporation)

723964, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director) 12-29-12

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