

F120000000097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

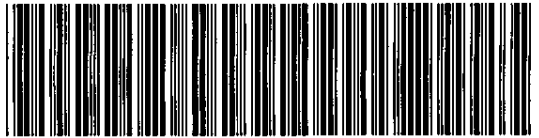
(Business Entity Name)

(Document Number)

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2012 APR 20 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** County Surplus Co.  
(Name of Corporation)

**DOCUMENT NUMBER:** F12000000097

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

Please return all correspondence concerning this matter to the following:

Armando Cardella  
(Name of Person)

County Surplus Co.  
(Name of Firm/Company)

28 West Flagler Street, Suite 1000  
(Address)

Miami, FL 33130  
(City/State and Zip Code)

For further information concerning this matter, please call:

Armando Cardella at ( 305 ) 320-3939  
(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**

2012 APR 20 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

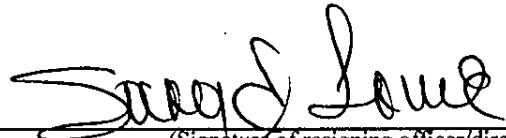
FILED

I, Sara Lowe, hereby resign as Officer - Pres.  
(Title)

of County Surplus Co.  
(Name of Corporation)

F12000000097, a corporation organized under the laws of the State of  
(Document Number, if known)

Colorado

  
(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