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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Loss Prevention Distributors, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F13000001647

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

Please return all correspondence concerning this matter to the following:

John A. Millspaugh

(Name of Person)

Loss Prevention Distributors, Inc.

(Name of Firm/Company)

601 N Congress Ave, Ste. 106

(Address)

Delray Beach, FL 33445

(City/State and Zip Code)

For further information concerning this matter, please call:

John A. Millspaugh

....561 \278-7131

(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

ÖFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



_{ı.} George E. Levings	, hereby resign as Chairman	
,	(Title)	
of Loss Prevention D	,	
(Nam	e of Corporation)	
F13000001647	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Delaware		

Gignature 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 Loss Prevention Distributors 601 N Congress Ave, Ste 106 Delray Beach, FL 33445

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301