F77215

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| | (Requestor's Name) | | |
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| | (City/State/Zip/Phone # | *) | |
| PICK-U | P WAIT | MAIL | |
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| | (Business Entity Name |) | |
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| • | (Document Number) | | |
| Certified Copies Certificates of Status | | | |
| Special Instruction | s to Filing Officer: | | |
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SECRETARY OF STATE TALLAHASSEE, FLORIO,

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COVER LETTER

| -TO: Amendment Section Division of Corporations | | | | - | |
|--|--|------------------------------------|---------------|-----------------|-------|
| SUBJECT: Irrigation Systems, | Inc. | | • | | |
| SUBJECT: | (Name | of Corpora | ition) | | _ |
| DOCUMENT NUMBER: F77 | 215 | | | • • | |
| The enclosed Officer/Director Resi | | • | •• | ibmitted for fi | iling |
| Please return all correspondence co | oncerning this m | atter to th | e following: | , to a pro- | . • |
| Cathy L. Gentry | | | • . | | |
| (Name of Per | rson) | | | | |
| Irrigation Systems, Inc. | | · . | • | | |
| (Name of Firm/C | ompany) | | | • | |
| 1907 NW 18 Street Unit #2 | • | <u>:</u> . | | • | |
| (Address) |) | | | •• | |
| Pompano Beach, FL 33069 | | | | | ٠ |
| (City/State and Z | ip Code) | | | | |
| For further information concerning | this matter, ple | ase call: | | | |
| Kim Francese | at (| 954 | 943-0108 | | _ |
| (Name of Person) | | Area Code | & Daytime To | lephone Numb | er) |
| Enclosed is a check for \$35.00 ma | de payable to the | e Florida I | Department of | State. | : |
| | | | V** | • | • |
| Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle | Mailing Add Amendment Division of C Post Office E Tallahassee, | Section Corporation Sox 6327 | ns | | |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

TALLAHASSEE. FLORIO

| I, Cathy L. Gentry | , hereby resign as | President | (Title) |
|-----------------------------|------------------------------|-----------------|---------------------|
| of Irrigation Systems, Inc. | | • | • |
| F77215 | (Name of Corporation) | | |
| (Document Number, if known | , a corporation organized ur | nder the laws (| of the State of 🙄 📑 |
| Florida | · | | |
| ٠. | | | |
| : | | • | |

(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