

F980000000923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

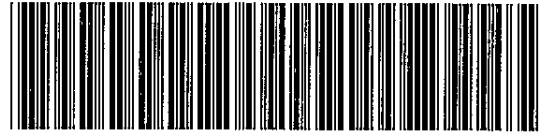
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Liberty Service Corporation of Florida
(Name of Corporation)

DOCUMENT NUMBER: F9800000923

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

Please return all correspondence concerning this matter to the following:

LACHERY L GUZMAN
(Name of Person)

LSC Florida Corp
(Name of Firm/Company)

2708 E. DR. M.L.K. JR.
(Address)

TAMPA FL 33610
(City/State and Zip Code)

For further information concerning this matter, please call:

LACHERY L GUZMAN at (813) 2328723
(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**

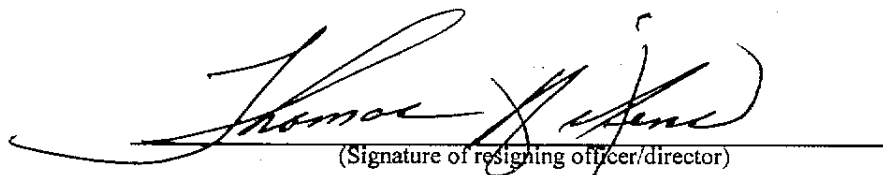
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, THOMAS AIKENS, hereby resign as CHBD
(Title)

of LIBERTY SERVICE CORPORATION OF FLORIDA
(Name of Corporation)

F9800000923, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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