

H15087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

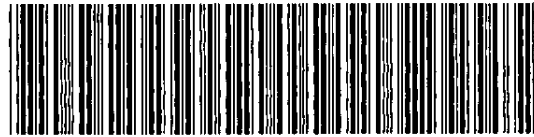
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500181459095

*Resignation
to officer*

06/07/10--01007--013 **35.00

RECEIVED
10 JUN - 7 AM 10:50
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

FILED
10 JUN - 7 AM 11:00
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ferrentino & Son Inc
(Name of Corporation)

DOCUMENT NUMBER: H15087

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

Please return all correspondence concerning this matter to the following:

Thomas Steppen

(Name of Person)

(Name of Firm/Company)

3245 SW 46th Avenue

(Address)

Ocala, Florida 34474

(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Steppen

at (352) 427-1796

(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**

FILED

10 JUN -7 AM 11:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Thomas Steppen, hereby resign as Director
(Title)

of Ferrentino & Son Inc
(Name of Corporation)

H15087, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Thomas Steppen 6/7/10
(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