H83584

(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:





900306233359

12/05/17--01025--027 **35.00

11 0EC -4 AND 11 10



TRANSMITTAL LETTER

SUBJECT: BRYANT SECURITY CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: H83584

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

David Ben-David

Amendment Section Division of Corporations

TO:

(Name of Person)

Pollack, Pollack & Kogan, LLC

(Name of Firm/Company)

44 West Flagler Street, Suite 2050

(Address)

Miami, Florida 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary W. Pollack, Esq. 30

(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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{ı,} David Ben-David	, hereby resign as
	(Title)
of BRYANT SECURIT	TY CORPORATION
•	of Corporation)
H83584 (Document Number, if known)	, a corporation organized under the laws of the State of
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