## K75202

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| (Ad                     | dress)            |             |
| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phone | <b>=</b> #) |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nan | ne)         |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | of Status   |
| Special Instructions to | Filing Officer:   |             |
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EALLANASSELLATION AND A

C. LEWIS

APR 9 2014

EXAMINER

## TRANSMITTAL LETTER

| SUBJECT: Crystal Pool Services Inc. (Name of Corporation)                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: K-7.5202                                                                                                                                                                            |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing                                                                                                         |
| Please return all correspondence concerning this matter to the following:                                                                                                                            |
| TEFFrey Rohler (Name of Person)                                                                                                                                                                      |
| Crystal Pool Services Two. (Name of Firm/Company)                                                                                                                                                    |
| 10718 NW 53 Street (Address)                                                                                                                                                                         |
| Sunitse F1. 333 5/<br>(City/State and Zip Code)                                                                                                                                                      |
| For further information concerning this matter, please call:                                                                                                                                         |
| TEFFrey Rohler at (954) 748-1306 (Area Code & Daytime Telephone Number)                                                                                                                              |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State.                                                                                                                     |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301 |

Amendment Section Division of Corporations

TO:

APPRILATE AND FILET

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

14 APR -4 PM 2:47
SECRETARY UP STATE
TALL AHASSET, FLORID:

| I, JEFFrey E. Kohler, hereby resign as Director. (Title)                            |    |
|-------------------------------------------------------------------------------------|----|
| of Crystal Pool Services Two. (Name of Corporation)                                 |    |
| (Document Number, if known), a corporation organized under the laws of the State of |    |
| Florida.                                                                            |    |
| as of 1-1-20                                                                        |    |
| Jack Formatting of the signing officer/director)                                    | ッソ |

## 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