L52682

(Requestor's Name)		
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(City	//State/Zip/Phone	e.#)
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: LTI Industries, II	VC
	(Name of Corporation)
DOCUMENT NUMBER: 15	52682
The enclosed Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Barbara S. Izlar	
(Name of P	'erson)
LTI Industries, Inc.	
(Name of Firm/	Company)
19250 US Hwy 27	
(Addres	ss)
Clermont, FL 34715	
(City/State and	Zip Code)
For further information concerning	ng this matter, please call:
Barbara S. Izlar	at (352) 394-8399 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 m	ade payable to the Florida Department of State.
Street Address:	Mailing Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations Post Office Box 6327
Division of Corporations Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	a spange associately a har artificial to

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Lauriston T. Izlar	, hereby resign as Director
?	(Title)
of_LTI Industries, Inc.	
(Nai	ne of Corporation)
L52682 (Document Number, if known)	, a corporation organized under the laws of the State of
FL	
	SECKE JAKE OF STATE TALLAHASSEE, FLORIDA (Signature of resigning officer/prector)

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