## 1120433

(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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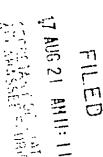


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S TALLENT

Old Resign





July 19, 2017

AUDREY H. ROSS ROSS AND ASSOCIATED, INC. 4689 PONCE DE LEON BOULEVARD #201 CORAL GABLES, FL 33146

SUBJECT: ROSS AND ASSOCIATES, INC.

Ref. Number: M20433

We have received your document for ROSS AND ASSOCIATES, INC., however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 617A00014626

Susan Tallent Regulatory Specialist II

www.sunbiz.org

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ROSS and ASSOCIATES, INC. (Name of Corporation)

DOCUMENT NUMBER: M20433

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

Please return all correspondence concerning this matter to the following:

Audrey H. Ross
(Name of Person)

Ross and Associates, Inc.

(Name of Firm/Company)

4689 Ponce de leon Boulevard #201

(Address)

Coral Gables, FL 33146

(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas J. Palmieri at (305 ) 441.9021 (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

William W. Culbertson IV, hereby resign as Director			
		(Title)	
of ross and Asso	ciates, Inc.		
	(Name of Corporation)		
M20433	a corporation organized ur	, a corporation organized under the laws of the State of	
(Document Number, if know	wn)		
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