

N11000010019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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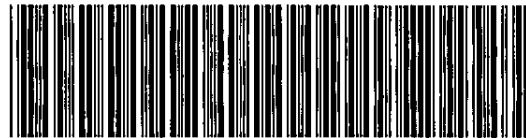
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIDPES

SEP 16 2014

R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: REMOVAL OF OFFICER

(Name of Corporation)

DOCUMENT NUMBER: 211000010019

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

Please return all correspondence concerning this matter to the following:

LILLIAN SHEPHERD

(Name of Person)

FOUNDATION FOR LAW AGENCY SUPPORT

(Name of Firm/Company)

P O BOX 906

(Address)

FORT PIERCE, FL 34954

(City/State and Zip Code)

For further information concerning this matter, please call:

JESPER STAHLFORS at **(772) 332-7200**

(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**

I, LILLIAN SHEPEHRD, hereby resign as SECRETARY
(Title)

of FOUNDATION FOR LAW AGENCY SUPPORT,
(Name of Corporation)

211 000010019, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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