N1400005265

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MALLAHASSEE FLORIDA

DR ghelif

TRANSMITTAL LETTER

SUBJECT: Acuveterans Inc. (Name of Corporation)
DOCUMENT NUMBER: NI400005765
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
Geoffrey Sherman
Acuveteras (Name of Firm/Company)
Noos Rosewood Dr (Address)
Port Richer FC 31468 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (77) 458-4179 (Area Code & Daytime Telephone Number)

Mailing Address: Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

I, Christing Fatolitis, hereby resign as TAL GRASSE CI ORIDA

of Acuveteen Solve (Name of Corporation)

N1400005265

(Document Number, if known)

Florige

(Document Number, if known)

(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