

N19 000 003 736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

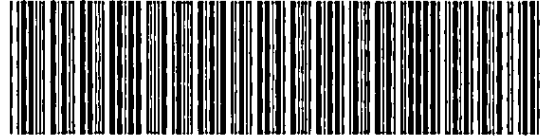
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SECRETARY OF STATE  
CORPORATION  
2022 SEP 13 PM 3:43

J DENNIS  
DEC 14 2022

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: COMPASSIONATE COPS, INC.  
\_\_\_\_\_  
(Name of Corporation)

DOCUMENT NUMBER: N19000003736  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

22220 RED LAUREL LANE  
\_\_\_\_\_  
(Address)

ESTERO, FL 33928  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

~~XXXXXXXXXX~~ CARMINE DELL'AQUILA at (516) 848-0939  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, HOLLOWAY, JOHN, hereby resign as Secretary  
(Title)

of COMPASSIONATE COPS, INC.  
(Name of Corporation)

N19000003736, a corporation organized under the laws of the State of  
(Document Number, if known)  
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