## P00000013094

| (Req                      | uestor's Name)   |                    |
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| PICK-UP                   | ☐ WAIT           | MAIL               |
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| Special Instructions to F | iling Officer:   |                    |
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## TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations  |
|---|
| SUBJECT: 5m. th. Exterprises / Diverse Service, (Name of Corporation)                         |
| DOCUMENT NUMBER: POOOGO 13094   |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following:                     |
| Robin W. Sm. th. (Name of Person)   |
| Sn to Endupries During Led Lineus<br>(Name of Fight/Company)                                  |
| 2706 Colonies Dyline (Address)  |
| Jackson / Buh FL. 32250<br>(City/State and Zip Code)  |
| For further information concerning this matter, please call:                                  |
| Rod. L. Sm., In at (904) 249 3260 (Name of Person) (Area Code & Daytime Telephone Number)     |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State.              |

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| ı, ω. ( ,     | helch     | , hereby resign as                        | V. P.              | (Title)          |          |
|---------------|-----------|---|--------------------|------------------|----------|
| of Sm to      | CALIPINES | Diwis Gred<br>Corporation)                | Service            | 1, Incoc         | peration |
| (Document Num | <u></u>   | a corporation organized un                | nder the laws of t | the State of     | f        |
| <u>F(A.</u>   | *         |   |                    |                  |          |
|               | WC W      | elph<br>nature of resigning officer/direc | etor)              | SECRETARY OF STA | FILED    |

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