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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SCOTT PROTECTION SYSTEMS, NC (Name of Corporation)
DOCUMENT NUMBER: 600000 42556
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
TAME S M. CARABETTA (Name of Person)
(Name of Firm/Company)
3517 ISCAND OAKS S. (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (863) 670-4553 (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ι,	JAMES M.	CARABETTA	_, hereby resign as_	VICE	PRESIDENT (Title)	AND DIRECTO	K
of	ScoT PR	OTECT/ON S (Name of Corporati	YSTEMS, 11	/C		,	
	P 000000 42556 (Document Number, if known	, a corpo	ration organized und	der the la	ws of the State	of	
	FLURIDA	·					
		Janes M (Signature of	resigning officer/direct	or)		N. Janes	

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