

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dualitess Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
-

Office Use Only



400279964594

12/18/15--01015--013 **105.00

SECRETARY OF STATE

15 DEC 18 AH 10: 0

DEC 21 2015

R. Wm. ..

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

լ Lloyd J. Boggio	, hereby resign as Director
/ 	(Title)
_{of} Tuscany Lakes, I	nc.
(Nar	me of Corporation)
P00000084980	, a corporation organized under the laws of the State of
(Document Number, if known)	<u> </u>
Florida	

Signature of resigning officer/direction)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

15 DEC 18 AM 10: 09
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314