

PO1000076285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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O/D Resign

05/30/06

De

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FERRY LAWN SERVICE, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P0100076285

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

Please return all correspondence concerning this matter to the following:

JOSEPH J. FERRY 3RD  
(Name of Person)

FERRY LAWN SERVICE, INC.  
(Name of Firm/Company)

P.O. Box 977  
(Address)

PAZM CITY, FL 34991  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH J. FERRY 3RD at (772) 485-5814  
(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

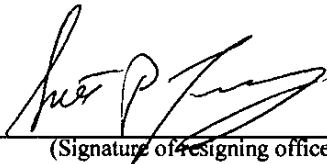
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Scott Ferry, hereby resign as Director  
(Title)

of Ferry Lawn Service, Inc.  
(Name of Corporation)

P0100076285, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 MAY 18 PM 3:26

**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