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(Re	equestor's Name)		
. (Ac	ldress)	34,	
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	÷#)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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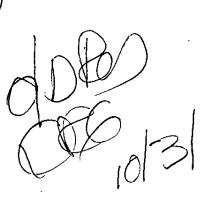


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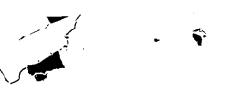


COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: UNIVERSAL OIL, INC.
(Name of Corporation)
DOCUMENT NUMBER: P01000102175
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DARRYL S. SCHREIBER, ESQUIRE
(Name of Person)
SCHREIBER, SCHREIBER & SCHREIBER, P.A.
(Name of Firm/Company)
5600 SHERIDAN STREET
(Address)
HOLLYWOOD, FL 33021
(City/State and Zip Code)
For further information concerning this matter, please call:
DARRYL S. SCHREIBER, ESQ. at (954) 966-5600 (Area Code & Daytime Telephone Number)
(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, TIMOTHY JOLLOFF	, hereby resign as			
", <u> </u>	(Title)	*		
of UNIVERSAL OIL INC.		,		
(Name	e of Corporation)			
P01000102175 (Document Number, if known)	, a corporation organized under the laws of the State of			
FLORIDA				
· · · · · · · · · · · · · · · · · · ·	Signature of resigning officer/director)	F.Sc.	meents -match	
	FILING FEE IS \$35.00	AHASSEE, FL	11 OCT 28 PM	

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

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