

PD20000062180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

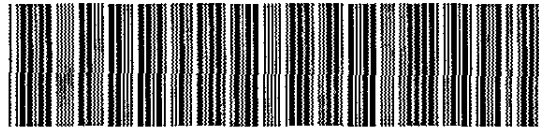
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OLD Rec.
T. Lewis

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CSG SIGNS INC
(Name of Corporation)

DOCUMENT NUMBER: P02000062180

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

Please return all correspondence concerning this matter to the following:

HASAN RIFAT
(Name of Person)

CSG SIGNS INC
(Name of Firm/Company)

5003 40TH ST N
(Address)

Tampa FL 33610
(City/State and Zip Code)

For further information concerning this matter, please call:

RIFAT HASAN at (813) 690-8264
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RIFAT HASAN, hereby resign as P, S, D
(Title)

of CSG SIGNS INC
(Name of Corporation)

P02000062180, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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

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TALLAHASSEE, FLORIDA