P02000

71842

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	#)
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TRANSMITTAL LETTER

Division of Corporations	·	
Swift Security, Inc. SUBJECT:		
	(Name of Corporation)	
DOCUMENT NUMBER: P02000071842	<u> </u>	
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all correspondence concernir	ng this matter to the following:	
Christine Grover		
(Name of Person)		
Swift Security, Inc.		
(Name of Firm/Company)		
31 Kirk Street		
(Address)		
Lowell, MA 01852		
(City/State and Zip Code)	-	
For further information concerning this ma	atter, please call:	
Tim Grover	at (978 580-8144) (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payal	ble to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

20/2 - - 6 At. 7: 48

Barbara Boryslawski I,	President , hereby resign as
,	(Title)
Swift Security	y, Inc.
	(Name of Corporation)
P02000071842 (Document Number, if known of the company of the comp	. a corporation organized under the laws of the State of
Florida	
· · · · · · · · · · · · · · · · · · ·	·
	Bulin Bu Durté
	(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