

PO2000079422

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Pollux Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P02000079422

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

Please return all correspondence concerning this matter to the following:

Monica M. De Vivero  
(Name of Person)

Pollux Services, Inc.  
(Name of Firm/Company)

4196 Pine Ridge Lane  
(Address)

Weston, FL 33331  
(City/State and Zip Code)

For further information concerning this matter, please call:

Monica De Vivero at (954) 478 0034  
(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, Monica M. De Vivero, hereby resign as President  
(Title)

of Pollux Services, Inc.  
(Name of Corporation)

P0000079422, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Monica M. De Vivero  
(Signature of resigning officer/director)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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