

P02000089508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

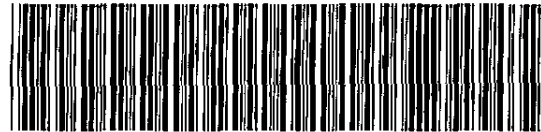
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05 NOV 21 AM 10:00
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL AMERICAN LANDSCAPE & NURSEY, INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000089508

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

Please return all correspondence concerning this matter to the following:

JEANNIE MURPHY

(Name of Person)

MARING BOOKKEEPING SERVICE, INC.

(Name of Firm/Company)

5795 ORANGE DRIVE

(Address)

DAVIE, FLORIDA 33314

(City/State and Zip Code)

For further information concerning this matter, please call:

JEANNIE MURPHY

(Name of Person)

at (954) 792-5075

(Area Code & Daytime Telephone Number)

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

Please send Certificate of Status

\$8.75

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**

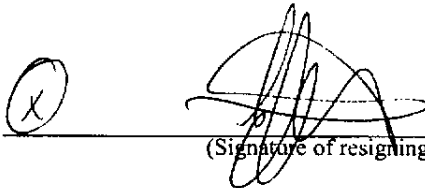
I, EMMANUELLE FORTIER, hereby resign as VP
(Title)

of ALL AMERICAN LANDSCAPE & NURSEY, INC.
(Name of Corporation)

P02000089508, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

FILED
NOV 21 AM 10:00
TALLAHASSEE, 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