

3/18/2021

Division of Corporations

PO2000112468

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H21000110547 3)))



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To:

Division of Corporations
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COR AMND/RESTATE/CORRECT OR O/D RESIGN
ASAAP, INC.

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MAR 12 2021

TRANSMITTAL LETTER

((H21000110547 3))

TO: Amendment Section
Division of Corporations

SUBJECT: ASAAP, INC.

(Name of Corporation)

DOCUMENT NUMBER: P02000112468

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

Please return all correspondence concerning this matter to the following:

COOPER L. WELCH

(Name of Person)

ASAAP, INC.

(Name of Firm/Company)

2411 NE OLD BLUE SPRINGS ROAD

(Address)

LEE, FLORIDA 32059

(City/State and Zip Code)

For further information concerning this matter, please call:

COOPER L. WELCH
_____ at (_____) _____
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

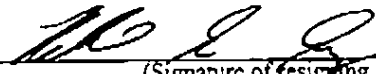
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**OFFICER / DIRECTOR RESIGNATION ((H21000110547 3)))
FOR A CORPORATION**

I, ROBIN K. SQUIRES, hereby resign as VICE-PRESIDENT
(Title)

of ASAAP, INC.
(Name of Corporation)

P02000112468, 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

2021 MAR 19 AM 11:23
ED
STATE
TALLAHASSEE, FL

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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