

P03000003705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

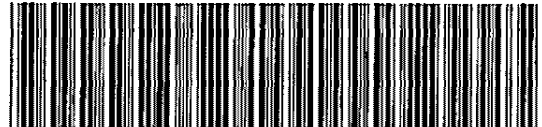
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TALLAHASSEE, FLORIDA

04 JUN -1 PM 2:04

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALLSTATE LABORERS, INC.

(Name of Corporation)

DOCUMENT NUMBER: P03000003705

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 VICTORES

(Name of Person)

ALL STATE FENCE, INC.

(Name of Firm/Company)

12030 SW 77 TERRACE

(Address)

MIAMI, FL 33183

(City/State and Zip Code)

For further information concerning this matter, please call:

MONICA VICTORES

(Name of Person)

at (305) 271-1956

(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, VICTOR FERNANDEZ, hereby resign as DIRECTOR
(Title)

of ALLSTATE LABORERS, INC.
(Name of Corporation)

P03000003705, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
04 JUN - 1 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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FOR A CORPORATION**

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(Title)

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P03000003705 a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
04 JUN - 1 PM 2:04
DEPT. OF STATE
TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

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Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314