

PD3000066820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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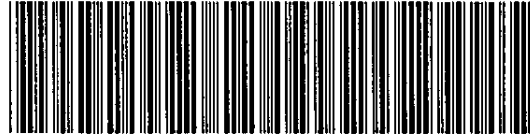
(Business Entity Name)

(Document Number)

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M. L. LARSEN, FLORIDA

MAY 21 2015

C McNAIR

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SMOOTH MOVE INSTALLATIONS, INC
(Name of Corporation)

DOCUMENT NUMBER: P03000066820

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

Please return all correspondence concerning this matter to the following:

KIMBERLY J REED

(Name of Person)

R. SHANE REED

(Name of Firm/Company)

813 RIPLEY TER NE

(Address)

PALM BAY FL 32907

(City/State and Zip Code)

659 Dinner St NE

Palm Bay FL 32907

For further information concerning this matter, please call:

R. SHANE REED

(Name of Person)

at (321) 863-1036

(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
2661 Executive Center Circle
Tallahassee, FL 32301

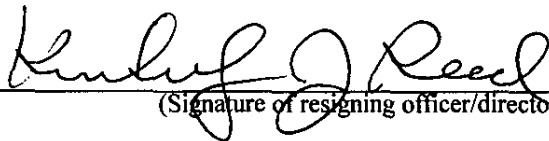
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, KIMBERLY J REED, hereby resign as SEC TREAS
(Title)

of SMOOTH MOVE INSTALLATIONS, INC
(Name of Corporation)

P03000066820, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
15 MAY 18 AM 5:55
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