P03000149691

(Re	equestor's Name)		
(Ad	idress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



400042788484

16/15/04 0/038 023 **35.00

O4 NOV 17 PM 3: 14
SECRETARY of ARR



TRANSMITTAL LETTER

•

Amendment Section Division of Corporations

TO:

SUBJECT: Universal Floor Company (Name of Corporation)
DOCUMENT NUMBER: Posoci49691
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Keith Smith (Name of Person)
(Name of Firm/Company)
2674 Robert Trent Jones dr. Apt + 327 (Address)
Oclando, M. 32835 (City/State and Zip Code)
For further information concerning this matter, please call:
Keith Smith at (321) 388 - 8489 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Keith Smith	, hereby resign as_	YP_	(Title)	
of Universal Floor Com (Name o	pony f Corporation)			_,
(Document Number, if known)	., a corporation organized und	der the laws	of the State of Oh NOV 17 1	ا منطقت ا المحدد المارا المناز علوا المنز علوا
	gnature of resigning officer/direct	or)	PM 3: 14 OF STATE EE. FLORIDA	y fa angli nan

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