03000153354

(R	equestor's Name)	
(A	ddress)	
(Ar	ddress)	··-
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
(D	ocument Number)	
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TO: Amendment Section Division of Corporations

COVER LETTER

SURJECT. DeSciscio Painting Company, Inc.
SUBJECT: Desciscio Painting Company, inc. (Name of Corporation)
DOCUMENT NUMBER: F03000153354
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Richard DeSciscio
(Name of Person)
DeSciscio Painting Company Inc.
(Name of Firm/Company)
12309 Cloverstone Dr
(Address)
Tampa, FL 33624
(City/State and Zip Code)
For further information concerning this matter, please call:
Ric DeSciscio at (813) 84 (6929) (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
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.	Jodi A Desciscio		hereby resign as_	Secretary
-1 		· · · · · · · · · · · · · · · · · · ·		(Title)
of.	Desciscio Painting	Company,	Cnc.	
·	(Nar	(Name of Corporation)		
	P03000153354	, a corporation organized under the laws of the State of		
	(Document Number, if known)	, a corpora	tion or Suttleon my	TOT THE IT AS ON THE DAME OF
	Florida			

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mall to:

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