

P03000155632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

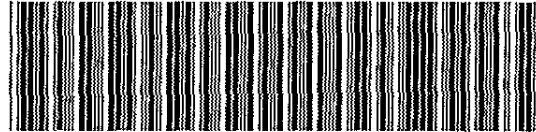
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800108099628

08/21/07--01016--023 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 AUG 21 AM 9:16

FILED

*off*  
*Ry*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cimarron Construction, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000155632

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

Please return all correspondence concerning this matter to the following:

Kathy Seleske

(Name of Person)

Cimarron Construction, Inc.

(Name of Firm/Company)

16176 Cortez Blvd.

(Address)

Brooksville, FL 34601

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathy Seleske

(Name of Person)

at ( 352 ) 796-3122

(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:**

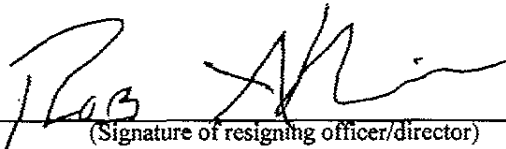
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Robert Albonico, hereby resign as Secretary  
(Title)

of Cimarron Construction, Inc.  
(Name of Corporation)

P03000155632, 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**

**Make checks payable to Florida Department of State and mail to:**

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

**FILED**  
07 AUG 21 AM 9:16  
STATE DEPT OF STATE  
TALLAHASSEE, FLORIDA