

PO4000030885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

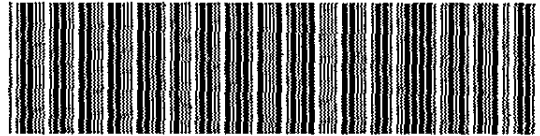
(Business Entity Name)

(Document Number)

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700087459307

*Resignation
of Officer*

02/09/07--01022--017 **35.00

FILED
2007 FEB -9 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Asst
2/12/07*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lisa Christopolus Painting and Pressure Washing Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000030885

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

Please return all correspondence concerning this matter to the following:

Lisa Christopolus
(Name of Person)

(Name of Firm/Company)

P.O. Box 1734
(Address)

Englewood, FL 34295
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Christopolus at (941) 780-6454
(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:
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**

FILED

2007 FEB -9 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, YVLAINE ROYO, hereby resign as DIRECTOR
(Title)

of Lisa Christopolus Painting & Pressure Washing Inc.
(Name of Corporation)

P04000030885, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Yvaine Royo
(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