

P04000036543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

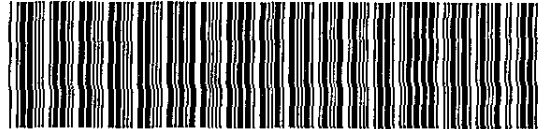
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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70

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GRASSMASTERS LANDSCAPE AND IRRIGATION INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000036543

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

Please return all correspondence concerning this matter to the following:

BRIAN T. BORGIET

(Name of Person)

(Name of Firm/Company)

487 DOGWOOD AVE

(Address)

ORANGE CITY FL. 32763

(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN BORGIET

(Name of Person)

at ( 321 ) 438-1998

(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

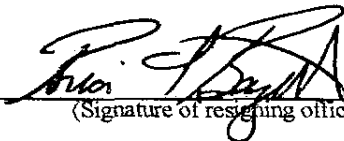
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, BRIAN T. BORGIET, hereby resign as DVPLT  
(Title)

of GRASSMASTERS LANDSCAPE AND IRRIGATION INC.  
(Name of Corporation)

P04000036543, 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

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**