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| (Re | equestor's Name) | |
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| (Ad | dress) | |
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| PICK-UP | ☐ WAIT | MAIL |
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COVER LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: Russell Asset Ma | nagement, Inc. (Name of Corporation) |
|--|--|
| D | • |
| DOCUMENT NUMBER: PO | |
| The enclosed Officer/Director Re | esignation for a Corporation and fee are submitted for filing |
| Please return all correspondence | concerning this matter to the following: |
| Diane Drennon | |
| (Name of P | Person) |
| | |
| (Name of Firm | (Company) |
| 4132 Rolling Springs Dr. | |
| (Addre | ss) |
| Tampa, FI 33624 | |
| (City/State and | Zip Code) |
| For further information concerning | ng this matter, please call: |
| Diane Drennon | at (813) 273-5277 (Area Code & Daytime Telephone Number) |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 m | nade 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

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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