

PO4000104710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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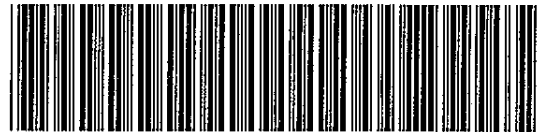
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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OLD
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Freedom Towing and Recovery Inc
(Name of Corporation)

DOCUMENT NUMBER: P0400104710

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

Please return all correspondence concerning this matter to the following:

Vanessa R Bookout
(Name of Person)

Freedom Towing and Recovery
(Name of Firm/Company)

5487 NW 89th Way
(Address)

Coral Springs FL 33067
(City/State and Zip Code)

For further information concerning this matter, please call:

Vanessa Bookout at (954) 494-3695
(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

04 OCT 11 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Charles Birchfield, hereby resign as President
(Title)

of Freedom Towing and Recovery Inc
(Name of Corporation)

P04000104710, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Charles Birchfield
(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