

PD40000128839

(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



000045214720

01/24/05--01067--009 **35.00

FILED
05 JAN 24 PM 4:45
TALLAHASSEE, FLORIDA

DD/Res
1a
1.27.05

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Shutterman of Central Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000128839

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

Please return all correspondence concerning this matter to the following:

Glen Schwam
(Name of Person)

(Name of Firm/Company)

13643 Waterhouse Way
(Address)

Orlando, FL 32828
(City/State and Zip Code)

For further information concerning this matter, please call:

Glen Schwam at (407) 739-2827
(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

FILED
05 JAN 24 PM 4:45
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Glen Schwam, hereby resign as Vice President
(Title)

of Shutterman of Central Florida, Inc.
(Name of Corporation)

P04000128839, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Glen Schwam
(Signature of resigning officer/director)

FILED
05 JAN 24 PM 4:45
TALLAHASSEE, FLORIDA

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