

P05000049303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

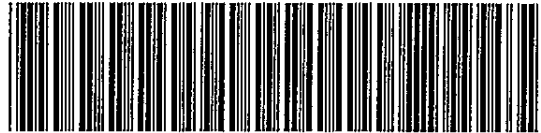
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Resignation Of Officer  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000049303  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Jason R Davis  
\_\_\_\_\_

(Name of Person)

L N L Accessories & Service, Inc  
\_\_\_\_\_

(Name of Firm/Company)

303 SW 33rd Terrace  
\_\_\_\_\_

(Address)

Deerfield Beach, FL 33442  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason R Davis  
\_\_\_\_\_

(Name of Person)

at ( 954 ) 725-0383

(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, Amanda L Davis, hereby resign as Vice President  
(Title)

of L N L Accessories & Services, Inc  
(Name of Corporation)

Po5000049303 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

FILED  
05 AUG 22 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA