P05000 8342)

(Re	equestor's Name)	
(Ad	dress)	-
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(Cit	ty/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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08/24/07--01012--018 **35.00

SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Klinias Landscaping · Inc (Name of Corporation) DOCUMENT NUMBER: P0500083421
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICIAIL Klimas (Name of Person)
Klimas Landscaping Inc (Name of Firm/Company)
6430 Calusa Drive (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
City/State and Zip Code) For further information concerning this matter, please call: Melante Imas at (803) lale1 - 0318 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for \$35,00 made payable to the Florida Department of State
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Nejanie	Klineas	, hereby resign as	Pyside (Title	Lt e)	
of_	Klimas	Lande Ca (Name of Cor	DING INC-		,	
<u>Pc</u>	(Document Number,	ta, a c	corporation organized und	ler the laws of the S	State of	
	Horida					
		1				
		Mlanig (Signatu	JUMQ8 ire of resigning officer/directors	or)	07 AUG 24 AM 9: 19 SECRETARY OF STATE TALLAHASSEE. FLORIC	
					19 ATE	

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