05000088727

(Req	uestor's Name)		
(Add	ress)			
(Add	ress)			
(City)	/State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



900056667729

07/29/05--01032--004 **35.00



C. Coulliste JUL 2 9 2005

TRANSMITTAL LETTER

SUBJECT: Terra Firma Title & Escrow, Inc. (Name of Corporation) DOCUMENT NUMBER: P05000088727 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filit Please return all correspondence concerning this matter to the following: Shayna Bechtel (Name of Person) Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) at (772) 418-1940 (Area Code & Daytime Telephone Number (Area Code & Daytime Telephone Num	TO: Amendment Section Division of Corporations	
(Name of Corporation) DOCUMENT NUMBER: P05000088727 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filit Please return all correspondence concerning this matter to the following: Shayna Bechtel (Name of Person) Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) at (772) 418-1940 (Area Code & Daytime Telephone Number (SUBJECT: Terra Firma Title &	Escrow, Inc.
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing Please return all correspondence concerning this matter to the following: Shayna Bechtel (Name of Person) Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) (Name of Person) at (772) 418-1940 (Name of Person) 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 409 E. Gaines Street		(Name of Corporation)
Please return all correspondence concerning this matter to the following: Shayna Bechtel (Name of Person) Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) at (772) 418-1940 (Name of Person) 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 Street Address: Amendment Section Division of Corporations P.O. Box 6327	DOCUMENT NUMBER: P05	6000088727
Shayna Bechtel (Name of Person) Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) 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 Street Address: Amendment Section Division of Corporations P.O. Box 6327	The enclosed Officer/Director Resi	ignation for a Corporation and fee are submitted for filing
(Name of Person) Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) at (772	Please return all correspondence co	oncerning this matter to the following:
Terra Firma Title & Escrow, Inc. (Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) (Name of Person) 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 SETTECT Address: Amendment Section Division of Corporations 409 E. Gaines Street	Shayna Bechtel	
(Name of Firm/Company) 205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) (Area Code & Daytime Telephone Number (Area	(Name of Per	son)
205 SE Village Drive (Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) at (772) 418-1940 (Area Code & Daytime Telephone Number (Area Code & D	Terra Firma Title & Escrow, Inc	o.
(Address) Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) (Name of Person) at (772) 418-1940 (Area Code & Daytime Telephone Number (Area Code & Daytime Telephone (Area Code &	(Name of Firm/C	ompany)
Port Saint Lucie, Florida 34952 (City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) (Name of Person) Area Code & Daytime Telephone Number (Area Code & Daytime Telephone (Area	205 SE Village Drive	
(City/State and Zip Code) For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) at (772) 418-1940 (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 Street Address: Amendment Section Division of Corporations P.O. Box 6327	(Address)	
For further information concerning this matter, please call: Shayna M. Bechtel (Name of Person) (Name of Person) 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 Annual Matter, please call: 772 418-1940 (Area Code & Daytime Telephone Number of State) (Area Code & Daytime Telephone Number of State) (Area Code & Daytime Telephone Number of State)	Port Saint Lucie, Florida 34952	2
Shayna M. Bechtel (Name of Person) at (772) 418-1940 (Area Code & Daytime Telephone Number Code 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 At (772) 418-1940 (Area Code & Daytime Telephone Number Code is a check for \$35.00 made payable to the Florida Department of State.	(City/State and Zi	ip Code)
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 Street Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street	For further information concerning	this matter, please call:
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 Street Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street	Shayna M. Bechtel	at (772) 418-1940
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street	(Name of Person)	(Area Code & Daytime Telephone Number)
Amendment Section Division of Corporations P.O. Box 6327 Amendment Section Division of Corporations 409 E. Gaines Street	Enclosed is a check for \$35.00 made	le payable to the Florida Department of State.
Tallahaccee El 37314 Tallahaccee El 27200	Amendment Section Division of Corporations	Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
05 JUL 29 PM 2: 06
SECRETARY OF STATE
PARLEANASSEF, FLORED

I, Shayna M. Bechtel	, hereby resign as	Director	(Title)
ofTerra Firma Title & Escr		· —	······································
	(Name of Corporation)		
P05000088727 (Document Number, if known	, a corporation organized un	der the laws	of the State of
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