PO500/35946

(Re	questor's Name))
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Tile Masters Of Jacksonville Inc.
(Name of Corporation)
DOCUMENT NUMBER: P05000135926
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Edin Suljanovic
(Name of Person)
(Name of Firm/Company)
3706 Robert Scott Dr. East
(Address)
Jacksonville, FL 32207
(City/State and Zip Code)
For further information concerning this matter, please call:
Edin Suljanovic at (904) 627-6520 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Edin Suljanovic	hereby resign as Director	•		
	, notory rough as	(Title)		
ofTile Masters Of Jackson				
	(Name of Corporation)			
P05000135926 (Document Number, if known)	, a corporation organized under the la	, a corporation organized under the laws of the State of		
Florida				
		o		
	(Signature of resigning officer/director)	SELVALIAN 19		
		P 8: 10		

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