

POS000107525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

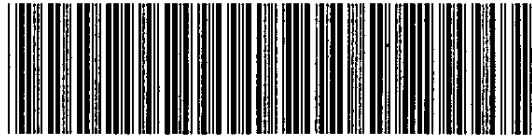
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

BD/RES  
10 9.13.07

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CASTILLO TREE AND LAWN SERVICE, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P05000167525

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

Please return all correspondence concerning this matter to the following:

GHEOVANNI CASTILLO

(Name of Person)

CASTILLO TREE AND LAWN SERVICE, INC.

(Name of Firm/Company)

P.O. BOX 50364

(Address)

SARASOTA, FL 34232

(City/State and Zip Code)

For further information concerning this matter, please call:

GHEOVANNI CASTILLO

(Name of Person)

at ( 941 ) 266-1728

(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, WLISES ALTAMIRANO, hereby resign as DIRECTOR  
(Title)

of CASTILLO TREE AND LAWN SERVICE, INC.  
(Name of Corporation)

P05000167525, 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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 SEP 10 PM 4: 20**