(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	**************************************
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	)
Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	
	·	
		į
		į

Office Use Only



500201995065

04/18/11--01016--027 \*\*35.00

DIVISION OF CORPORATION

DD RES

## **COVER LETTER**

SUBJECT: LeRCh'S Custon Painting Tros

(Name of Corporation)

DOCUMENT NUMBER: POGODO 80 59

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Connie Miller (Name of Person)

Lerch'S Custom Painting Tros
(Name of Firm/Company)

Lerch'S Leewan Dro
(Address)

Sarasota Fl. 34240
(City/State and Zip Code)

For further information concerning this matter, please call:

Connie Miller at 941 371-5860
(Name of Person)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:** 

TO:

Amendment Section

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, Consie Miller, hereby resign as Va Pa (Title)		
of Lerch's Cyston Painting Inc. (Name of Corporation)		
P06 0000 60 59, a corporation organized under the laws of the State (Document Number, if known)	ate of	
Florida		
Come Miller (Signature of resigning officer/director)	11 APR 18 AHII:	DIVISION OF CORPORA

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314