PD6000043733

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/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:	
		·

Office Use Only



000076424320

06/28/06--01014--008 **35.00

My Dudesy

T. Roberts JUL 0 6 2008



TO:

Amendment Section Division of Corporations

COVER LETTER

SUBJECT: Christophern Wedver Tree Expret Conderere Revolutions (Name of Corporation) Inc.
· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: PO6 \$ \$ \$ 43733
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tvaw w. Weaver (Name of Person)
Parties Provided to the Provided to the Provided to the Province of the Provin
Christopher A. Webver Tree Experts Candscope Removations Inc (Name of Firm/Company)
(Name of Firm/Company)
3009 Bent Pine Dr. (Address)
(Address)
City/State and Zip Code)
For further information concerning this matter, please call:
Array Jo Greatch at 712 871-5011 (Name of Person) (Area Code & Daytime Telephone Number)

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

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

OFFICER / DIRECTOR RESIGNATION

FILED

FOR A CORPORATION

OF JUN 28 PM 12: 08

SECRETARY OF STATE

FALLAHASSEE. FLORIDA

I. Amy Jo Greulet hereby resign as Resident

(Title)

Of Christopher A. Weaver Tree Expert? (audscare Renovations)

(Name of Corporation)

Tor.

POGATA PUBLICATION

(Document Number, if known)

FILING FEE IS \$35.00

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

Amendment Section Division of Corporations P.O. Box 6:27 Tallshassee, Florida 32314