

PO6000051469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100076137701

06/16/06--01017--013 **35.00

FILED
06 JUN 16 PM 1:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Sec. 211 2008

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CUSTOM MULCHING & RECYCLING, INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000051469

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CECIL EUNICE
(Name of Contact Person)

CUSTOM MULCHING & RECYCLING, INC.
(Firm/Company)

P.O. Box 77100
(Address)

JACKSONVILLE, FL 32226
(City/State and Zip Code)

For further information concerning this matter, please call:

THERESE PRICE at (904) 714-4400
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

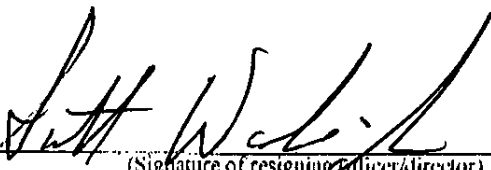
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Scott Washington, hereby resign as Director
(Title)

of Custom Mulching + Recycling, Inc.
(Name of Corporation)

P06000051469 a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
06 JUN 16 PM 1:55
SECRETARY OF STATE
TALLAHASSEE 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