P06000072912

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		·

Office Use Only



800277026718

09/25/15--01004--017 **70.00



SEP 2 9 2015 C McNAIR

TRANSMITTAL LETTER

TRANSMITTAL LETTER
TO: Amendment Section Division of Corporations
SUBJECT: JAWS SERVICES INC. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: POLOOOD 72912
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOSHUA WEDDINGTON (Name of Person)
Name of Firm/Company)
11275 US HWY 98 W STE 6125 (Address)
MIXAMAR BEACH FL. 32550 (City/State and Zip Code)
For further information concerning this matter, please call:
Soshua WEDDINTION at (850) 218 8191 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ADAM WEWINGTON	, hereby resign as VP T 3
•	(Title)
of JAWS SERVICES	· · · · · · · · · · · · · · · · · · ·
(Na	me of Corporation)
Po 6 0000 72912 (Document Number, if known)	, a corporation organized under the laws of the State of
FWRIDA	·
	5
	15 SEP 25
ada	Dollar = M
	(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