

P06000135032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

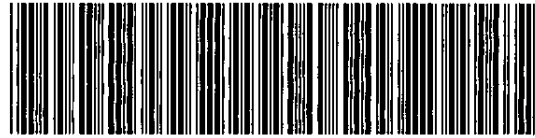
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900177885649

*Resignation
of Officer*

04/29/10--01012--024 **35.00

FILED
2010 APR 29 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*AOR
5/4/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tri County LP Gas Services, Inc
(Name of Corporation)

DOCUMENT NUMBER: P06000135032

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

Please return all correspondence concerning this matter to the following:

June A McLaughlin

(Name of Person)

Tri County LP Gas Services Inc

(Name of Firm/Company)

3223 N Lockwood Ridge Rd #28

(Address)

Sarasota FL 34234

(City/State and Zip Code)

For further information concerning this matter, please call:

June McLaughlin

(Name of Person)

at (941) 256-6364

(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**

FILED

2010 APR 29 PM 3:38

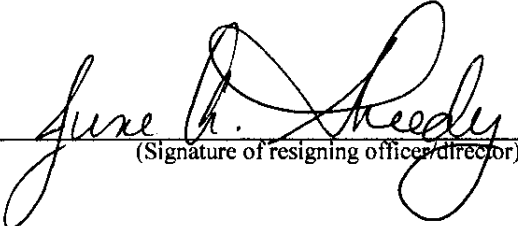
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, June A Sheedy, hereby resign as Director
(Title)

of Tri County LP Gas Services, Inc.
(Name of Corporation)

P06000135032, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director) 4/26/10

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