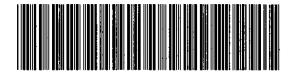
## P07000009949

(Re	questor's Name)	_
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	}
Certified Copies	Certificate	s of Status
•	_	
Special Instructions to	Filing Officer:	





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<del>489/12/88 81013-008 \*\*78.0</del>0

09/12/08--01013--008 \*\*35.00

08 SEP 12 PH 3: 29

SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

SUBJECT: OASiS Pool CONSULTANTS INC. (Name of Corporation)
DOCUMENT NUMBER: <u>P0700009949</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LARS DAVID GALYAW (Name of Person)
OASis Pool CONSULTANTS INC. (Name of Firm/Company)
7105 Glendyne DR S. (Address)
JACKSONVILLE FL 32216 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (904) 730 - 7665  (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

Amendment Section Division of Corporations

TO:

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, William MCowan, hereby resign as Sec. TRes. (Title)	DiRector
of OASiS Post ConsulTANTS INC. (Name of Corporation)	,
Po700009949, a corporation organized under the laws of the State of (Document Number, if known)	,
Florio A	
11/1/20	
(Signature of resigning officer/director)	
G	SIAID

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