

P07000036971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

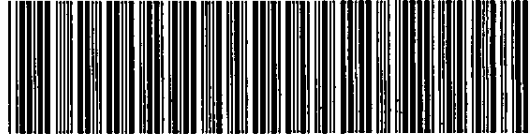
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Amendment Section<sup>^</sup>  
Division of Corporations

**SUBJECT:** Curtoom Companies Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000036971

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

Please return all correspondence concerning this matter to the following:

**Job Gammons**

(Name of Person)

**Curtoom Inc**

(Name of Firm/Company)

**PO Box 76192**

(Address)

**Tampa, FL 33675**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Job Gammons** at **(850) 819-1717**  
(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:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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


**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Job Gammons, hereby resign as Director  
(Title)

of Curtoom Companies Inc  
(Name of Corporation)

P07000036971, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

<sup>4</sup>  
**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

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TALLAHASSEE, FLORIDA

Note: My name was added to this company<sup>^</sup> without my consent. as a Director