## P0800005274

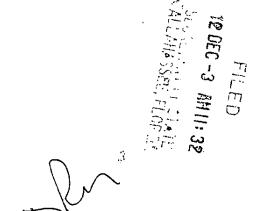
(Req	uestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
·		
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
·	•	
		·

Office Use Only



300242307213

12/03/12--01034--029 \*\*35.00



IDEC 4 2012

C. MUSTAIN

## TRANSMITTAL LETTER

SUBJECT: <u>Creater Inage And Scape Services</u> Inc (Name of Corporation)
DOCUMENT NUMBER: POBOCO 5274
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melanie Festamo Wilson (Name of Person)
Creater Image Landscape Dr.c. (Name of Firm/Company)
1352 Fauronald Dr (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (727) 772-3115 (Area Code & Daytime Telephone Number)

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

**TO:** Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Melanie Ferlaino Wilson, hereby resign as Sect	Title)	<del>_</del>	<del></del>
of Greater Tragel Andscape Services	$\sum_{i}$	<u>-</u>	,
Po800005274 a corporation organized under the laws of the (Document Number, if known)	e State of	f	
<u> </u>	SSERVIN	₽ DEC =3	
			T TO
(Signature of resigning officer/director)		လ (၁)	

## 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