

P08000022563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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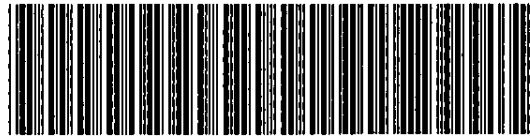
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

*11-29-11*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ACE FLOOD & INSPECTIONS, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000022563

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

Please return all correspondence concerning this matter to the following:

COSTA THEODOROPOULOS

(Name of Person)

ACE FLOOD & INSPECTIONS, INC.

(Name of Firm/Company)

4801 HOLLYWOOD BLVD, SUITE C

(Address)

HOLLYWOOD, FLORIDA 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

SPIROS THEODOROPOULOS

(Name of Person)

at ( 954 ) 924-1808

(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

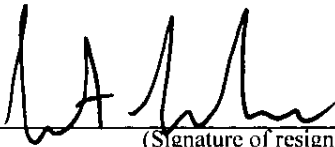
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**  
**11 DEC 27 PM 2:38**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

I, COSTA THEODOROPOULOS, hereby resign as TREASURER  
(Title)

of ACE FLOOD & INSPECTIONS, INC.  
(Name of Corporation)

P08000022563, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA.

  
(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