PD8 000047498

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DIRECT Protective Services, I (Name of Corporation) DOCUMENT NUMBER: PO8000047498
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Richard PARE (Name of Person)
Dieget Protective Services (Name of Firm/Company)
3345 FORREST DR. (Address)
Hollywood Fl 3302/ (City/State and Zip Code)
For further information concerning this matter, please call:
Richard Part at (305) 798-0040 (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 (Title) Corporation organized under the laws of the State of

(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