(Re	questor's Name)	
(Ad	dress)	<del>.</del>
(Ad	dress)	
(Cit	y/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: A+ Pool Service of Florida, Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: P08000071454	
The enclosed Officer/Director Resignation for a Corporation and fee are	submitted for filing
Please return all correspondence concerning this matter to the following	!
Nancy J. Hendershot	
(Name of Person)	
A+ Pool Service of Florida, Inc.	
(Name of Firm/Company)	
11453 Oceanspray Blvd.	
(Address)	
Englewood/FL/34224	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Lance Hendershot at ( 941 ) 830-1929	)
Lance Hendershot at (941) 830-1929 (Area Code & Daytime 7	Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of	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

I, Graham Blay	hereby resign as Direc	hereby resign as Director		
-7		(Title)		
of A+ Pool Service of Flori	ida, Inc.			
	(Name of Corporation)			
P08000071454 (Document Number, if known	a corporation organized under the	, a corporation organized under the laws of the State of		
Florida	<u> </u>			

(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 DIVISION OF CORPORATIONS
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