

PO8000077972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

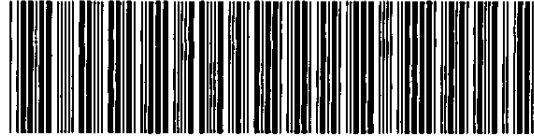
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 SEP 24 PM 1:59

FILED

T. Roberts SEP 30 2008

Fl. Dept of St

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NORTH EAST FLORIDA TURF CARE INC
(Name of Corporation)

DOCUMENT NUMBER: P08000077972

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

Please return all correspondence concerning this matter to the following:

THOMAS R CARROLL

(Name of Person)

NORTH EAST FLORIDA TURF CARE INC

(Name of Firm/Company)

1557 MOUNTAIN LAKE DRIVE EAST

(Address)

JACKSONVILLE, FL., 32221

(City/State and Zip Code)

For further information concerning this matter, please call:

CECIL WILSON

(Name of Person)

at (904) 771-3160

(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**

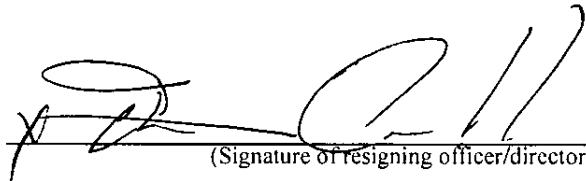
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08 SEP 24 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, THOMAS R CARROLL, hereby resign as DIRECTOR, VP
(Title)

of NORTH EAST FLORIDA TURF CARE INC .
(Name of Corporation)

P08000077972, 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