## 19000088139

(Re	equestor's Name)							
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	_ Certificates	s of Status						
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: OCD Property Services, Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P09000088739</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Joshua A. Knotts (Name of Person)
N A (Name of Firm/Company)
715 East Ridgewood St (Address)
Orlando, FC 32803 (City/State and Zip Code)
For further information concerning this matter, please call:
Toshua Knotts at (407) 284-0328 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

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,	Joshua	AK	notts	, her	eby resign as	CFO	(Title)	
of	OCD	Prop	enty (Name of C	Service (orporation)	es, In	<u>.</u> ,		,
F	OQDDOC (Document Nur	8 8 7 3 nber, if know	39, a	corporation	organized und	er the laws o	f the State of	
	Florido		·					
		<	-/ ns.	urbe	El	3		GD.
			, (Signa	iture of resign	ng officer/directo	r)	<b>11</b> JUL	NVISION
							5	ARY OF S

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314