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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Amendment Section Division of Corporations

TO:

(Name of Corpor	ration) .
DOCUMENT NUMBER: P09000090714	
The enclosed Officer/Director Resignation for a Corporation	n and fee are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
Michael Hage	
(Name of Person)	
R.E.O. Service Masters, Inc.	
(Name of Firm/Company)	
2855 Hawthorne Street	
(Address)	•
Orlando, Florida 32806	
(City/State and Zip Code)	•
For further information concerning this matter, please call:	
Michael Hage at (407	897-8860
(Name of Person) (Area Code	& Daytime Telephone Number)

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Michael Hage	. •	, hereby resign as	, Presiden	•	
•,		, mereo, realign at		(Title)	
of Reo Service Mas	ters Inc.	,			
	(Name of Corporatio	n)	• :		
P09000090714	a corpora	ation organized u	inder the law	vs of the State o	f
· ~ (Document Number,	if known)		•		
Florida					

Signature of resigning officer/director)

FILING FEF 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

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