

P1 00000 87107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

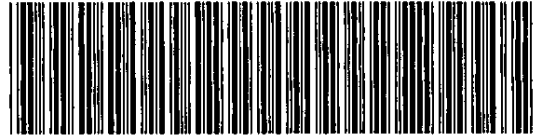
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700294882217

01/30/17--01006--022 **35.00

FILED

2017 JAN 30 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/6/17

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PALM BEACH DESIGNER POOLS, INC
(Name of Corporation)

DOCUMENT NUMBER: P10000087107

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

Please return all correspondence concerning this matter to the following:

JULIE TODOROV

(Name of Person)

(Name of Firm/Company)

3716 SW SUNSET TRACE CIR

(Address)

PALM CITY FL 34990

(City/State and Zip Code)

For further information concerning this matter, please call:

JULIE TODOROV

(Name of Person)

at (**772**) **872-2499**

(Area Code & Daytime Telephone Number)

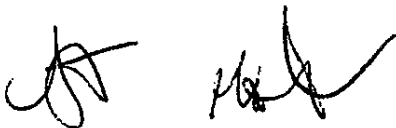
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301



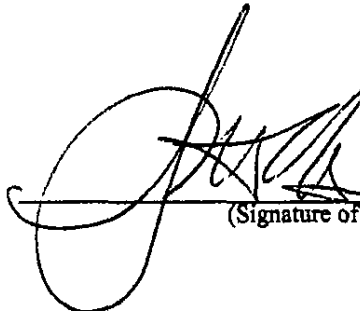
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JULIE TODOROV, hereby resign as VICE PRESIDENT
(Title)

of PALM BEACH DESIGNER POOLS INC,
(Name of Corporation)

P10000087107, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

FILED
2017 JAN 30 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

