

P10000093369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

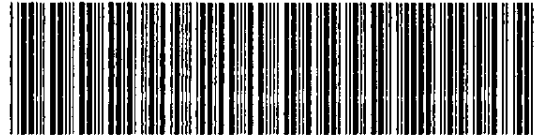
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign.

TBrown

3-16-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A and S Judgment Recovery, Inc
(Name of Corporation)

DOCUMENT NUMBER: P10000093369

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

Please return all correspondence concerning this matter to the following:

Renee Amster

(Name of Person)

A and S Judgment Recovery, Inc

(Name of Firm/Company)

9912 NW 17th Street

(Address)

Coral Springs, FL 33071

(City/State and Zip Code)

For further information concerning this matter, please call:

Renee Amster

(Name of Person)

at (954) 599-8124

(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**

FILED
2011 MAR 14 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Renee Amster, hereby resign as Officer/Director
(Title)

of A and S Judgment Recovery, Inc.,
(Name of Corporation)

P10000093369, 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