P11000000 4849

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Na	me)
(Do	ocument Number)
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

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05/11/16--01016--021 **35.00

SECRETAS TO STATE

MAY 1 3 2016

C LEWIS

TRANSMITTAL LETTER *

Division of Corporations
SUBJECT: Amy Sweet Plwving SMC (Name of Corporation) DOCUMENT NUMBER: PI 2000 4849
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
LISH Andrukanis (Name of Person)
Amy Sweet Flouring Inc (Name of Firm/Company)
4227 Augustine Rd (Address)
Spring hill Fla 34609 (City/State and Zip Code)
For further information concerning this matter, please call:
Lisa Andrukanis at (431) 774-8145 (Area Code & Daytime Telephone Number)

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

TO:

Amendment Section

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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED SECRETARY OF STATE DIVISION OF COOPERATIONS

16 MAY | | AM | |: | 7

I, MICHAEL THON	hereby resign as (Title)
of AMI SWEET (Na	FLOORING, FNC, me of Corporation),
P1100000 43 49 (Document Number, if known)	, a corporation organized under the laws of the State of
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