

P11000015639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

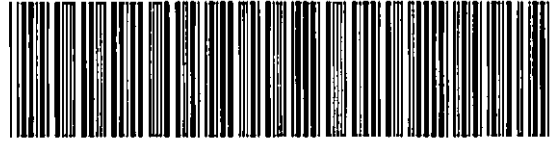
(Business Entity Name)

(Document Number)

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ALBANY

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sergeants Integrated Pest Solutions Incorporated

(Name of Corporation)

DOCUMENT NUMBER: P11000015639

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

Please return all correspondence concerning this matter to the following:

Christine M. Forte

(Name of Person)

Sergeants Integrated Pest Solutions Inc.

(Name of Firm/Company)

15275 Collier Blvd., 201/102

(Address)

Naples, FL 34119

(City/State and Zip Code)

For further information concerning this matter, please call:

Corey Ball _____ at (239) 290-4465
(Name of Person) (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:

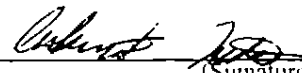
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Chistine M. Forte, hereby resign as Director
(Title)

of Sergeants Integrated Pest Solutions Inc.
(Name of Corporation)

PI1000015639, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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2021 JUN 24 PM 2:01
TALLAHASSEE, FL

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