

P110000 75490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
JUL 31 P 3 54

FILED

AUG 04 2017

T. LEMIEUX

112

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: NATIVE PRESERVE LAWNSCAPES INC.  
(Name of Corporation)

DOCUMENT NUMBER: P11000075490

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

Please return all correspondence concerning this matter to the following:

JAMES IRVINE  
(Name of Person)

NATIVE PRESERVE LAWNSCAPES INC.  
(Name of Firm/Company)

52 SECRETARY TRAIL  
(Address)

PALM COAST FL 32164  
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES IRVINE at ( 386 ) 338-8730  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

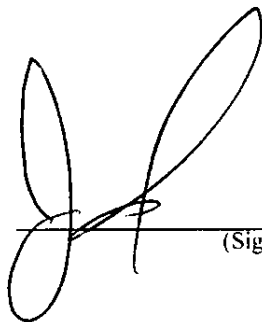
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JAMES W. IRVINE, hereby resign as PRESIDENT  
(Title)

of NATIVE PRESERVE LAWNSCAPES INC.  
(Name of Corporation)

P11000075490, 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

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TALLAHASSEE, FLORIDA