

PI2000074424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

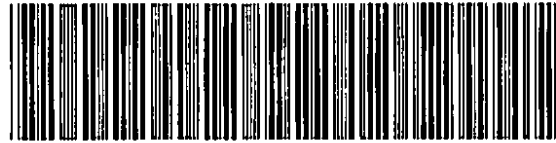
(Business Entity Name)

(Document Number)

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2020 AUG 14 AM 9:16

SECRETARY OF STATE  
TALLAHASSEE, FL

JQ 10/02/20

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Maverick Stables, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P12000074424

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

Please return all correspondence concerning this matter to the following:

Lane Foil

(Name of Person)

Maverick Stables, Inc.

(Name of Firm/Company)

8355 NW 60<sup>th</sup> Ave.

(Address)

Ocala, FL 34482

(City/State and Zip Code)

For further information concerning this matter, please call:

Allison Foil

(Name of Person)

at ( 352 ) 239. 3130

(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

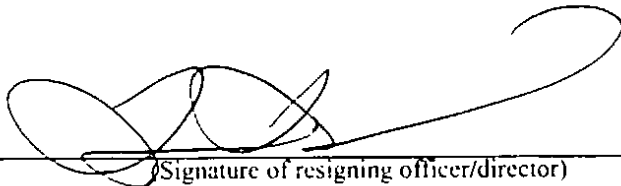
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Lane Foil, hereby resign as President  
(Title)

of Maverick Stables, Inc.  
(Name of Corporation)

P12000074424, 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, FL