

P130000013665

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Storm Force Mitigation Consultants Inc.
(Name of Corporation)

DOCUMENT NUMBER: P13000013665

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

Please return all correspondence concerning this matter to the following:

Emilee Voss
(Name of Person)

Storm Force Mitigation Consultants Inc.
(Name of Firm/Company)

277 Dorchester Dr.
(Address)

Venice FL 34293
(City/State and Zip Code)

For further information concerning this matter, please call:

Emilee Voss at (941) 716 2490
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2014

EMILEE VOSS
STORM FORCE MITIGATION CONSULTANTS INC
277 DORCHESTER DRIVE
VENICE, FL 34293

SUBJECT: STORM FORCE MITIGATION CONSULTANTS INC.
Ref. Number: P13000013665

We have received your document for STORM FORCE MITIGATION CONSULTANTS INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please submit the document in its entirety.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 114A00005494

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Emilee A Voss, hereby resign as VS _____
(Title)

of Storm Force Mitigation Consultants Inc.,
(Name of Corporation)

P130000013665, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Emilee Voss
(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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