(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
	•	

Office Use Only



400249248504

07/01/13--01007--024 **35.00

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Aespris Security Services, Inc. (Name of Corporation)
DOCUMENT NUMBER: P13000032594
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
William Rankin
(Name of Person)
Aespris Security Services, Inc.
(Name of Firm/Company)
128 SE 11th Street
(Address)
Deerfield Beach, FL 33441
(City/State and Zip Code)
For further information concerning this matter, please call:
William Rankin (Name of Person) at (305) 395-3304 (Area Code & Daytime Telephone Number)
(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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, hereby resign as	Officer/Director	
,	(Title)	
rvices, Inc.		
Corporation)		
a corporation organized under the laws of the State of		
	, hereby resign as rvices, inc. Corporation) a corporation organized un	

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314