

P140000013606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

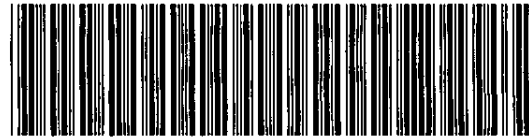
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400266352494

Resignation
of officer.

11/14/14--01028--003 **35.00

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2014 NOV 14 PM 1:27
CLERK OF STATE
TALLAHASSEE, FLORIDA

11/26/14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Absolute Quality Renovations, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P14000013606

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

Please return all correspondence concerning this matter to the following:

Tracy Fowler

(Name of Person)

Absolute Quality Renovations, Inc

(Name of Firm/Company)

3663 NW 67th Ave

(Address)

Gainesville, FL 32653

(City/State and Zip Code)

For further information concerning this matter, please call:

Tracy Fowler

(Name of Person)

at (**352**) **318-6107**

(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**

FILED

2014 NOV 14 PM 1:27

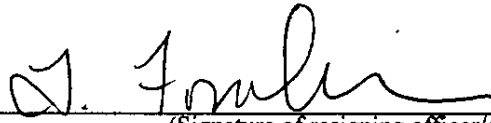
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Tracy Fowler, hereby resign as Vice President
(Title)

of Absolute Quality Renovations, Inc.
(Name of Corporation)

P14000013606, 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