

P14000040079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A Classic Cut Tree Service, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P14000040079

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

Please return all correspondence concerning this matter to the following:

Joshua Jones

(Name of Person)

(Name of Firm/Company)

1116 E Lakeview Cir

(Address)

Altamonte Springs FL 32714

(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua Jones

(Name of Person)

at (407) 558-1680

(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

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

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DIVISION OF CORPORATIONS
16 OCT -7 AM 10:56

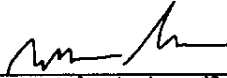
I, Joshua Jones, hereby resign as Vice President
(Title)

of A Classic Cut Tree Service, Inc.
(Name of Corporation)

P14000040079

(Document Number, if known)

, a corporation organized under the laws of the State of
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