P140005/508

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



400300785014

07/03/17--01010--017 **35.00

JUL 10 2017 S. YOUNG TO JUL -3 PAID: (

TRANSMITTAL LETTER

·4.

TO:	Amendment Section Division of Corporations
SUB	JECT: Agro Innova Co (Name of Corporation)
DOC	UMENT NUMBER: P14000051508
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Jos	seph W. Montgomery III
	(Name of Person)
	(Name of Firm/Company)
55	3 Slippery Rock Road
	(Address)
We	eston, FL 33327
	(City/State and Zip Code)
For fu	urther information concerning this matter, please call:
Jos	Seph Montgomery at (954) 258 3994 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis P.O. 1	ng Address: Independent Section Identify

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Joseph W. Montgomery III , hereby res	President and Director
i,, nereby res	(Title)
_{of} Agro Innova Co	
(Name of Corporation)	
P14000051508 (Document Number, if known), a corporation organ	ized under the laws of the State of
·	1 1 m
Forentwhontpoor	
(Signatur t of resigning offic	*

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