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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: S.T.A. P. Security COFP (Name of Corporation)) DOCUMENT NUMBER: P1400052091
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
S.T.A.R. Security cosp (Name of Firm/Company)
2011 SW Sun Ct (Address)
Port St. Lucie TC 34953 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (77Z) 834-9407 (Area Code & Daytime Telephone Number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, DAKOta French, hereby resign as COO
(Title)
of S.T.A.R. Security Corp. (Name of Corporation)
140005209/, a corporation organized under the laws of the State of (Document Number, if known)
Florida.
(Signature of resigning officer/director)
(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 15 JAN -2 AM 5: 42
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