

P14000076752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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NOTIFICATIONS

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lawn Care of Central Florida
(Name of Corporation)
DOCUMENT NUMBER: unknown PI4000076752

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

Please return all correspondence concerning this matter to the following:

Dan Fallucca
(Name of Person)
Lawn Care of Central Florida
(Name of Firm/Company)
1039 Spring Loop Way
(Address)
Winter Garden FL 34787
(City/State and Zip Code)

For further information concerning this matter, please call:

Jon Fallucca at (407) 545-9614
(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:
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**

I, Dan Fallucca, hereby resign as Director/Secretary
(Title)

of Lawn Care of Central Florida,
(Name of Corporation)

PI4000076752
unknown, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

16 AUG - 8 11 09:12
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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