P1400087345

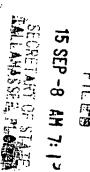
| (Rec | questor's Name) | |
|---|-------------------|----------------|
| (Add | dress) | . . |
| (Add | dress) | <u>.</u> |
| (City | //State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | siness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | ! |
| | | |
| | | |





100276431201

09/08/15--01006--011 **35.00





TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Sterling Cutz Lawn Service, Inc. (Name of Corporation) |
| DOCUMENT NUMBER: P 14000087.345 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Juliette M. Osceola (Name of Person) |
| Sterling Cutz Lawn Service, Inc. (Name of Firm/Company) |
| 1652 Cypress Ave (Address) |
| Labelle FL. 33935 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Patrick Osceola at (863-) 885-4251 (Name of Person) (Area Code & Daytime Telephone Number) |
| 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

CR2E044 (05/13)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| 1, Juliette M. Osce | ola, hereby resign as VSTD |
|-----------------------------|---|
| • | (Title) |
| of Sterling Cutz | Lawn Service, Inc. |
| • | of Corporation) |
| (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 15 SEP -8 AM 7: 1