P1600033379

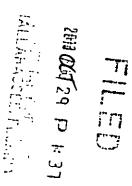
(Requ	iestor's Name)			
(Addr	ess)			
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(City/s	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
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TRANSMITTAL LETTER

SUBJECT: SLentz Construction, Inc. (Name of Corporation)
DOCUMENT NUMBER: P16000038879
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jerry SLentz II
SLentz Construction, Inc. (Name of Firm/Company)
1175 Sarasota Center Blvd.
Sarasota, Florida 34240
(City/State and Zip Code) For further information concerning this matter, please call:
Jarry SLentz at (941) 809-2185 (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, F1, 32301

Amendment Section Division of Corporations

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1	erry SLentz II	, hereby resign as	CEO (Title)
of	SLentz Consta	uction, Inc.	, ,
P16	000038879 .a ec	orporation organized under t	he laws of the State of
	Horida		
	Jeny (Signatur	re of resigning office/director)	
			THE CALL DATE OF THE PARTY OF T
	FILIN	G FEE IS \$35.00	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail $\overleftarrow{\text{to}}$: