

P18000025626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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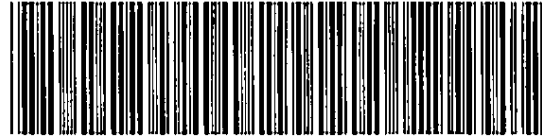
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SECTOR PUBLIC PRIVATE PARTNERS, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P18000025626

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

Please return all correspondence concerning this matter to the following:

**Stephen B. Singleteary**

(Name of Person)

SECTOR PUBLIC PRIVATE PARTNERS, INC.

(Name of Firm/Company)

3191 GRAND AVENUE BOX #331149

(Address)

**Coconut Grove, FL 33233**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Stephen B. Singleteary** at ( **312** ) **424-0464**

(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, Stephen B. Singleteary, hereby resign as Officer/Director  
(Title)

of SECTOR PUBLIC PRIVATE PARTNERS, INC.  
(Name of Corporation)

P18000025626, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Stephen B. Singleteary  
(Signature of resigning officer/director)

**FILED**  
2018 AUG -7 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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