

P20 0000027515

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SECRETARY OF STATE  
FALL ARKNESS OFFICE

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AA SERVICES OF JACKSONVILLE INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P20000027515  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

MICHEALYN ADAMS  
\_\_\_\_\_  
(Name of Person)

BEACHES TAX SERVICES OF N E FLORIDA, INC.  
\_\_\_\_\_  
(Name of Firm/Company)

6376 MOCKINGBIRD ROAD  
\_\_\_\_\_  
(Address)

JACKSONVILLE, FLORIDA 32219-3396  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

LYNN ADAMS at ( <sup>904</sup> <sup>503-0931</sup> )  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

2022 FEB -3 AM 9:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, AHMED ALMSHERFAWI, hereby resign as PRESIDENT  
(Title)

of AA SERVICES OF JACKSONVILLE, INC.  
(Name of Corporation)

P20000027515, a corporation organized under the laws of the State of  
(Document Number, if known)

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