P23000056220

(Requestor's Name)		
(Ad	dress)	
(Ad	dress)	
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(0)	70	- 10
(Cit	y/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u>-</u>
(23		
0 27 10 3	0 17	
Certified Copies	_ Certificates	s or Status
Special Instructions to Filing Officer:		
<u> </u>		

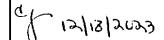


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Office Use Only



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

TREASURESCAPES LANDSCAPE INSTALLATION				
(Name of Corporation)				
DOCUMENT NUMBER: P23000056220				
The enclosed Officer/Director Resignation for a Corporation	n and fee are submitted for filing			
Please return all correspondence concerning this matter to t	he following:			
RICKEY LEWIS				
(Name of Person)	-			
TREASURESCAPES LANDSCAPE INSTALLATION				
(Name of Firm/Company)	-			
PO BOX 480187				
(Address)	-			
DELRAY BEACH, FL. 33448				
(City/State and Zip Code)	-			
For further information concerning this matter, please call:				
MARC RYNAR 954	599-2580) e & Daytime Telephone Number)			
(Name of Person) (Area Cod	e & 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

RICKEY LEWIS	VICE PRES, hereby resign as	
1,	, nereby resign as	(Title)
TREASURESCAPES LANDSCAPE of	INSTALLATION, I ac.	
	ame of Corporation)	
P23000056220 (Document Number, if known)	, a corporation organized under the laws of	the State of
FLORIDA		2623
		27
	(Signature of resigning officer/director)	
		: 25

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