

P93000011705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

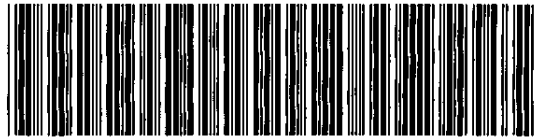
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D Reigh.
10/18/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONTROLLED SYSTEMS, INC.
(Name of Corporation)

DOCUMENT NUMBER: P93000011705

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

Please return all correspondence concerning this matter to the following:

JAY CROUCH
(Name of Person)

CONTROLLED SYSTEMS, INC.
(Name of Firm/Company)

3471 N. FEDERAL HWY #400
(Address)

FORT LAUDERDALE, FL 33306
(City/State and Zip Code)

For further information concerning this matter, please call:

JAY CROUCH at (954) 560-6553
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2007

JAY CROUCH
CONTROLLED SYSTEMS I, INC.
3471 N. FEDERAL HWY. #400
FT. LAUDERDALE, FL 33306

SUBJECT: CONTROLLED SYSTEMS I, INC.
Ref. Number: P93000011705

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE RESIGNING DIRECTOR MUST SIGN THE RESIGNATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Document Specialist

Letter Number: 007A00055683

2007 OCT 1 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

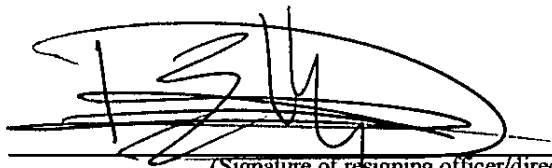
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DALE REYWER, hereby resign as DIRECTOR
(Title)

of CONTROLLED SYSTEMS INC.
(Name of Corporation)

P93000011705, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

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07 OCT 18 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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