

P94000025489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900250295149

08/07/13--01005 -018 **35.00

FILED

13 AUG -7 AM 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
AUG 12 2013
EXAMINER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STEVE TSARNAS & SON INC
(Name of Corporation)

DOCUMENT NUMBER: P 940000 25489

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

Please return all correspondence concerning this matter to the following:

STEVE TSARNAS
(Name of Person)

STEVE TSARNAS & SON INC
(Name of Firm/Company)

1647 N. E. 21 TERRACE
(Address)

JENSEN BEACH FLA 34957
(City/State and Zip Code)

For further information concerning this matter, please call:

STEVE TSARNAS at (772) 215-9820
(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**

FILED
13 AUG -7 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Carla Tsernaw, hereby resign as Secretary
(Title)

of STEVE TSAKINASTSON INC
(Name of Corporation)

P94000025489, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Carla Tsernaw
(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