

P97000065241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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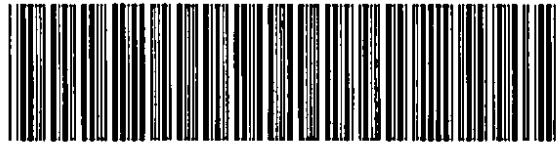
(Business Entity Name)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BEAR HOLLOW SOD, INC.

(Name of Corporation)

DOCUMENT NUMBER: P97000065241

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

Please return all correspondence concerning this matter to the following:

JOHN HARRIS

(Name of Person)

BEAR HOLLOW SOD, INC

(Name of Firm/Company)

P.O. BOX 954

(Address)

LAKE PLACID, FL. 33862

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN HARRIS

at (863) 699-5300
(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

I, MICHAEL A. HARRIS, hereby resign as TREASURER
(Title)

_____, 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

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