

P97000102068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

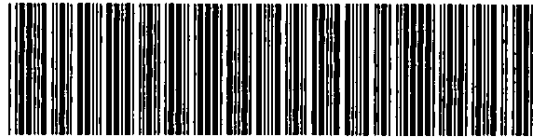
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200177552062

04/26/10--01073--007 **35.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 APR 27 PM 12:46

OD/Res
@ 4.29.10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All Seasons Planning Inc.

(Name of Corporation)

DOCUMENT NUMBER: P9700102068

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

Please return all correspondence concerning this matter to the following:

Karen Zuber

(Name of Person)

All Seasons Planning Inc.

(Name of Firm/Company)

PO Box 1536

(Address)

Lake City FL 32056

(City/State and Zip Code)

For further information concerning this matter, please call:

Karen Zuber

(Name of Person)

at (386) 755-3608

(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:

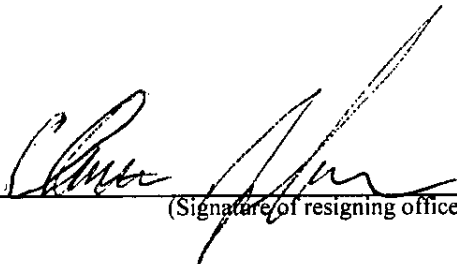
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Chris Zuber hereby resign as Vice President
(Title)

of All Seasons Planning Inc.
(Name of Corporation)

P9700102068, 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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 APR 27 PM 12:46