

P99000028354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

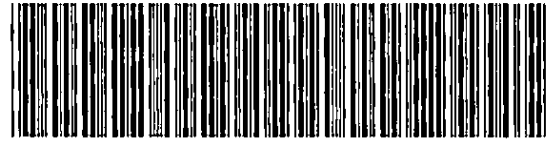
(Business Entity Name)

(Document Number)

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2018 DEC 31 AM 11:23

TO: Amendment Section
Division of Corporations

SUBJECT: ADAPTABLE SERVICES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P99000028354

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

Please return all correspondence concerning this matter to the following:

RICHARD C FOPIANO
(Name of Person)

ADAPTABLE SERVICES, INC.
(Name of Firm/Company)

643 NE MUSKRAT RUN
(Address)

PORT ST LUCIE, FL 34983
(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD C FOPIANO at (772) 342-3797
(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

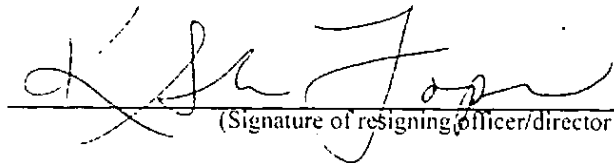
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, KAREN S FOPIANO, hereby resign as PRESIDENT, DIRECTOR
(Title)

of ADAPTABLE SERVICES, INC.
(Name of Corporation)

P99000028354, 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