

P99000073639

Requester's Name

Am. Scot Prop. Inc.  
20100 Highland Lakes Blvd.,  
Miami, FL 33160

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

300003908293--5

-03/23/01--01103--003

\*\*\*\*\*35.80 \*\*\*\*\*35.00

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☒ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
01 MAR 23 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

OFFICER / DIRECTOR RESIGNATION

I, William Aire, hereby resign as EXEC. VICE PRES.  
(Title)

of AM-SCOT PROPERTIES, INC.  
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

01 MAR 23 AM 11:16  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Signature of resigning officer/director)  
WILLIAM AIRE

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

(Signature)  
Witness

E. Aire

Witness

STATE OF Florida

COUNTY OF Osceola

On March 2, 2001 before me, Linda J. Locke, personally appeared  
, personally known to me (or proved to me on the  
basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within  
instrument and acknowledge to me that he/she/they executed the same in his/her/their authorized  
capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity  
upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature (Signature)

Affiant ☐ Known

☒ Unknown

ID Produced

Passport

(Seal)



Linda J. Locke  
MY COMMISSION # CC852551 EXPIRES  
July 6, 2003  
BONDED THRU TROY FAIR INSURANCE, INC.

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314