P99000090904

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

	endment Section ision of Corporations	
SUBJECT	:_ C.T. Lilly Plumbing,	Inc.
		(Name of Corporation)
DOCUME	NT NUMBER: P990	000096904
The enclose	ed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please retur	m all correspondence cor	ncerning this matter to the following:
Charles L	.illy	
	(Name of Person	on)
C.T. Lilly	Plumbing, Inc.	
	(Name of Firm/Co	mpany)
7 E 17TH	STREET	
	(Address)	
St. Cloud	FI 34769	
	(City/State and Zip	Code)
For further	information concerning	this matter, please call:
Charles L	•	at (407) 957-9988 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is	a check for \$35.00 made	e payable to the Florida Department of State.
Street Add Amendmen Division of Clifton Bui 2661 Execu Tallahassee	Iress: It Section Corporations Iding Itive Center Circle S. FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Shane Hess	, hereby resign as Vice President
,, <u> </u>	(Title)
of C.T. Lilly Plumbing, Inc.	
(N	ame of Corporation)
P9900096904 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
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(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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