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(D	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Stomoso Zina)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Landscape Planning Associates, Inc. (Name of Corporation)
DOCUMENT NUMBER: 5 42763
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Tammy D. Cook (Name of Person)
(Name of Firm/Company)
10227 Quito Street (Address)
Holly wood, FL 33026 (City/State and Zip Code)
For further information concerning this matter, please call:
Tammy D. Cook at (954) 684-0532 (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
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	Tammy	<i>D</i> .	Coole-		, hereby resign as	Preside	(Title)		
of_	Landsco	ye_	Planning (Name	4 Assoc e of Corporatio	iates, Inc.			,	
	5 427 (Document)		if known)	, a corpora	ation organized ur	ider the laws of	f the State of		
	Florida			<u>_</u> .					
			Ja	My / Signature of re	esigning officer/direct	tor)		04 JAN 27	71
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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