589030

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to F	Filing Officer:	
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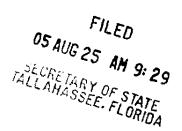
officer Resignation

T BROWN AUG 2 9 2005

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporation	s
SUBJECT: Sur Services, Inc	c
	(Name of Corporation)
DOCUMENT NUMBER:	889030
The enclosed Officer/Director I	Resignation for a Corporation and fee are submitted for filing
Please return all correspondence	e concerning this matter to the following:
LJ Maurer	
(Name of	Person)
Sur Services, Inc.	
(Name of Firm	n/Company)
3471 North West 20th Street	et
(Addr	ess)
Coconut Creek, Florida 330	66
(City/State an	d Zip Code)
For further information concern	ing this matter, please call:
LJ Maurer	at () 649-2429 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 p	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 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Laurie J. Maurer	, hereby resign as Secretary	
,	(Title)	
$_{ m of}$ Sur Services, Inc.		
(Nan	ne of Corporation)	
\$89030 (Document Number, if known)	, a corporation organized under the laws of the State of	
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