

P050000003030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

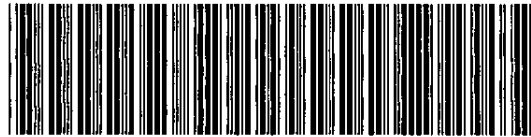
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LE LUMIERE, INC

(Name of Corporation)

**DOCUMENT NUMBER:** P05000003030

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

Please return all correspondence concerning this matter to the following:

GABRIEL PULIDO, M.D.

(Name of Person)

LE LUMIERE, INC

(Name of Firm/Company)

4325 SUN N LAKE BLVD SUITE 105

(Address)

SEBRING, FL 33872

(City/State and Zip Code)

For further information concerning this matter, please call:

GABRIEL PULIDO

(Name of Person)

at ( 863 ) 4710050 863-414 4903  
(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 11, 2012

GABRIEL PULIDO, M.D.  
LE LUMIERE, INC.  
4325 SUN N LAKE BLVD - STE. 105  
SEBRING, FL 33872

SUBJECT: LE LUMIERE, INC.  
Ref. Number: P05000003030

We have received your document for LE LUMIERE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Our records does not indicate the signing officer as treasurer. Please be specific in the name and title that you wish to resign from and correct the document as such.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 612A00018538

RECEIVED  
DIVISION OF CORPORATIONS  
2012 JUL 23 AM 8:38  
TO AGENCY OF FILING  
SUFFICIENCY OF FILING

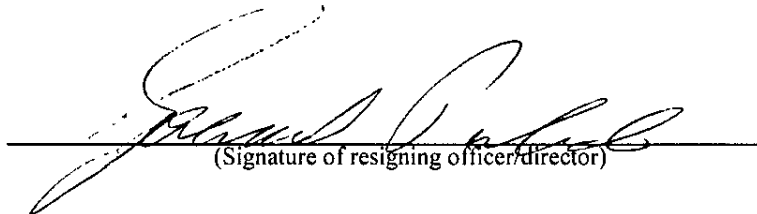
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Gabriel Allen Pulido, hereby resign as SD  
(Title)

of Le Lumiere Inc,  
(Name of Corporation)

P0500003030, 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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 23 AM 8:33