

**P16000048816**



**400312037514**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE FLORIDA  
CORPORATION DIVISION

APR 19 P 3 58

FILED

APR 23 2018  
T. LEJEUX

Handwritten initials 'LD' in the bottom right corner.

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ZAND GROUP, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P16000048816

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

Please return all correspondence concerning this matter to the following:

**SUYAPA TORRES**  
(Name of Person)

**ZAND GROUP, INC**  
(Name of Firm/Company)

**3111 NW 28 STREET**  
(Address)

**MIAMI, FL 33142**  
(City/State and Zip Code)

For further information concerning this matter, please call:

**SUYAPA TORRES** at ( 786 ) 3892239  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, SUYAPA TORRES, hereby resign as PRESIDENT  
(Title)

of ZAND GROUP, INC  
(Name of Corporation)

P16000048816, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

x Suyapa Torres  
(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

STATE OF FLORIDA  
TALLAHASSEE

APR 19 2 3 58

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