



**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

IUP CONTRACTORS INC

**SUBJECT:** \_\_\_\_\_  
(Name of Corporation)

P17000020028

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

FRANCO M SILVA

\_\_\_\_\_  
(Name of Person)

IUP CONTRACTORS INC

\_\_\_\_\_  
(Name of Firm/Company)

3301 NW 71ST TERR B

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

MIAMI, FL 33147

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANCO SILVA

786

3174759

\_\_\_\_\_  
(Name of Person) at (\_\_\_\_\_) \_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FRANCO M SILVA

Vice President

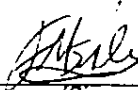
I, \_\_\_\_\_, hereby resign as \_\_\_\_\_  
(Title)

IUP CONTRACTORS

of \_\_\_\_\_  
(Name of Corporation)

P17000020028

\_\_\_\_\_, 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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 SEP 29 PM 3:07

**FILED**