P13000088701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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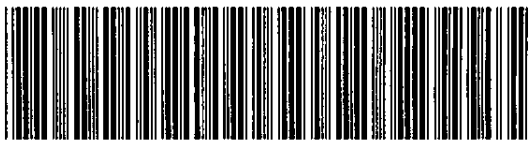

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15 AUG 24 AM 8:17

AUG 26 2015

C LEWIS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SPECIAL GUEST NETWORK CORP.
(Name of Corporation)

DOCUMENT NUMBER: P13000088701

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

Please return all correspondence concerning this matter to the following:

ROBERTO PECCHI
(Name of Person)

SPECIAL GUEST NETWORK CORP
(Name of Firm/Company)

245 18TH ST. APT 603
(Address)

MIAMI BEACH FL 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERTO PECCHI at (786) 564 2318
(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

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

15 AUG 24 AM 8:17

I, MANGIAROTTI CATERINA M, hereby resign as DIRECTOR
(Title)

of SPECIAL GUEST NETWORK CORP
(Name of Corporation)

P13000083701
(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