## P98000006134

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(Ad	dress)			
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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

(Name of Person)	(Area Code & Daytime Telephone Number)
LEON CZAMANSKI	at (786 234 7432 (Area Code & Daytime Telephone Number)
For further information concerning this	s matter, please call:
(City/State and Zip Co	ode)
HIALEAH, FL. 33016	
(Address)	
2483 W 80 ST	
(Name of Firm/Compa	nny)
A D MIRACLE, INC.	
(Name of Person)	
LEON M. CZAMASKI	
Please return all correspondence concer	rning this matter to the following:
The enclosed Officer/Director Resignat	tion for a Corporation and fee are submitted for filing
DOCUMENT NUMBER: P9800000613	
P0800000E13	(Name of Corporation)
SUBJECT:	

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

JOSE I. SALVATIERRA I.	SALES , hereby resign as		
	, nervey 100.gu ==	(Title)	
A D MIRACLE, INC.		,	
(Nam	e of Corporation)		
P 98000006134	, a corporation organized under th	e laws of the State of	
(Document Number, if known)			
FLORIDA			
	<u> </u>		
	(Signature of resigning officer/director)	FILED  2020 SEP -8 PM 4: 17  3 September 2020 SEP -8 PM 4: 17	

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