

399991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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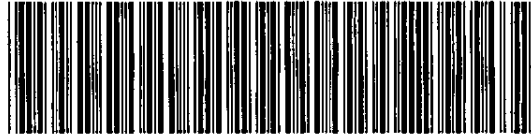
(Business Entity Name)

(Document Number)

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14 DEC 12 PM 1:31

CL.  
12-17-14

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VILLA CORTEZ MOTEL, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** 399991

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

Please return all correspondence concerning this matter to the following:

SALVATORE G. TRAFICANTE  
(Name of Person)

VILLA CORTEZ MOTEL, INC.  
(Name of Firm/Company)

4700 SW 8th STREET  
(Address)

CORAL GABLES, FL 33134  
(City/State and Zip Code)

For further information concerning this matter, please call:

SALVATORE G. TRAFICANTE at ( 561 ) 305-7664  
(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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

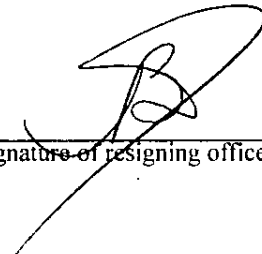
14 DEC 12 PM 1:31

I, LILIANA BIANCHI, hereby resign as SECRETARY  
(Title)

of VILLA CORTEZ MOTEL, INC.  
(Name of Corporation)

399991, 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