

484626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400304770344

10/20/17--01028--004 \*\*35.00

OCT 23 2017

S. YOUNG

FILED  
17 OCT 23 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Alpha Management Corp  
(Name of Corporation)

DOCUMENT NUMBER: 484626

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

Please return all correspondence concerning this matter to the following:

Boaz Bar-Navon

(Name of Person)

(Name of Firm/Company)

1062 Jans Pl.

(Address)

Melbourne, FL 32940

(City/State and Zip Code)

For further information concerning this matter, please call:

Boaz Bar-Navon at (321) 403-3991  
(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, Boaz Bar-Navon, hereby resign as Vice President  
(Title)

of Alpha Management Corp.  
(Name of Corporation)

484626, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director) 10/17/17

**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

FILED  
17 OCT 20 PM 3:35  
SECTION OF STATE  
TALLAHASSEE, FLORIDA