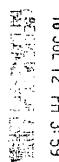
(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	÷#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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R. WentE



June 23, 2016

MIGUEL TOSAR 8370 SW 91 TERR MIAMI, FL 33156

SUBJECT: UNION ELECTRICAL CONTRACTOR, INC.

Ref. Number: 683823

We have received your document for UNION ELECTRICAL CONTRACTOR, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 516A00013287

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: UNION ELECTRICAL CONTRACTOR INC. (Name of Corporation) DOCUMENT NUMBER: 685823
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MIGUEL TOJAR_ (Name of Person)
MNION ELECTRICAL CONTRACTOR THE (Name of Firm/Company)
8370 SW. 91 TERR. (Address)
HIAM: FL 33156 (City/State and Zip Code)
-
For further information concerning this matter, please call:
Miguel Tosak at (305) 219-4224 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, MIGUEL 7	OSAR, hereby	resign as TREASUR	ek_
		,	•
of UNION	(Name of Corporation)	Courrector	Inc
682012			
(Document Number, if kr	, a corporation org	anized under the laws of the	State of
FLORIBA			

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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