F10093

(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:





900263438569

09/24/14--01016--001 **35.00

SECRETARY OF STATE TALLAHASSEE. FLORIDA

OCT 07 2014 T. CARTER

OID Resign

TRANSMITTAL LETTER

SUBJECT: RE; SOURCE SOUTH FLORIDA, INC.
(Name of Corporation) DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
DAVID VERNON
(Name of Person)
RE: SOURCE SOUTH FLORIDA, INC.
(Name of Firm/Company)
3550 BURRIS ROAD
(Address)
FT LAUDERDALE, FL 33314
(City/State and Zip Code)
For further information concerning this matter, please call:
DAVID VERNON (Name of Person) at (954) 868-8286 (Area Code & Daytime Telephone Number)
(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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 SEP 24 PM 2: 50

, SUSANA HURTADO	PRES/TREAS/DIRECTOR
* * * * * * * * * * * * * * * * * * * *	(Title)
of RE: SOURCE SOUT	H FLORIDA, INC.
(Name of C	orporation)
F10093	corporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	

(Signature of resigning officer/director)

Susawa M. Hurraso

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