

F15000 004 841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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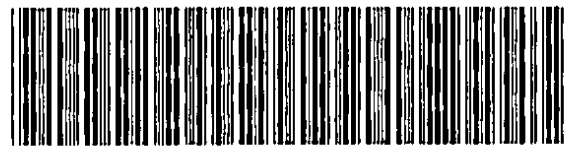
(Business Entity Name)

(Document Number)

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# TRANSMITTAL LETTER

1: Amendment Section  
Division of Corporations

**SUBJECT:** PEDON NORTH AMERICA, INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** F15000004841  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

DOVETTE DOBSON  
\_\_\_\_\_  
(Name of Person)

CFILE.COM LLC  
\_\_\_\_\_  
(Name of Firm/Company)

350 STATE HWY 249 STE 220  
\_\_\_\_\_  
(Address)

DUSTON, TX 77064  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

DOVETTE DOBSON at ( 855 ) 829-9090  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, PAOLO ZANOTTI, hereby resign as DIRECTOR  
(Title)

of PEDON NORTH AMERICA, INC.  
(Name of Corporation)

F15000004841, a corporation organized under the laws of the State of  
(Document Number, if known)  
DELAWARE

Paolo Zanotti  
(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

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