K15312

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<u> </u>
PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer	
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Office Use Only



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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER: K15312		
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all correspondence concernir	ng this matter to the following:	
PASQUALE SOTTILE		
(Name of Person)		
KENACO		
(Name of Firm/Company)		
102 NE 2ND ST		
(Address)		
BOCA RATON, FL 33432		
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
PASQUALE SOTTILE	at () 717-4952 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payal	ole to the Florida Department of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

PASQUALE SOTTILE	VICE PRESIDENT, hereby resign as	
- \	(Title)	
KENACO DEVELOPMENT COI		
	(Name of Corporation)	
K15312	, a corporation organized under the laws of the State of	
(Document Number, if known))	
FLORIDA		
<u> </u>	·	

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 2021 MAY 17 PH 11: 12