239613

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	TIAW [MAIL.
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STANK

MAY 1.2 2016 C. CARROTHERS

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Rossz Fiu Corporation

(Name of Corporation)

DOCUMENT NUMBER: L39613

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

Please return all correspondence concerning this matter to the following:

Michele S. Primeau

(Name of Person)

(Name of Firm/Company)

110 SE 6th Street, Suite 1700

(Address)

Fort Lauderdale, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Michele S. Primeau

_{4,7}954 \579-8

(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

_{1,} Michele S. Pri	imeau	_, hereby resign as Vice-President	
		(Title)	
of Rossz Fiu Co	rporation		
	(Name of Corporat	ion)	- '
L39613 (Document Number, if kn	, a corpo	oration organized under the laws of the State of	2316 HAY
Florida	·	San	5
Mich	nele Primea	Oligitally signed by Michele Primeau DN: cn=Michele Primeau, o, ou, email=msprimeau@gmail.com, c=US	MII: 37
<u></u>	(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