N05000006515

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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
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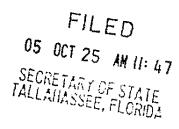
COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: CASIOPEIA CORPO	PRATION
	(Name of Corporation)
DOCUMENT NUMBER: N050	000006515
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence cor	acerning this matter to the following:
JANETH C FEREIRA ATP	
(Name of Perso	(no
AZOY TAX	
(Name of Firm/Coi	tipany)
1900 W COMMERCIAL BLVD	
(Address)	· · · · · · · · · · · · · · · · · · ·
FORT LAUDERDALE, FL. 3330	9
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
JANETH C FEREIRA	at (954) 229-1652 (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.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION • FOR A CORPORATION



I. ARIS A PENA	, hereby resign as
	(Title)
of CASIOPEIA CORPORATION	
(Nan	ne of Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	·
	XX-CFRETA
	(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