NORDOO11597

(Requestor's Name)	
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(Address)	
(Madicas)	
i	
(Address)	
(City/State/Zip/Phone #)	
(Only) Cate Light Honory	
PICK-UP WAIT MAIL	
(Business Entity Name)	
•	
(Document Number)	
Codifical Continues of Clarks	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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Splki Reigo

SECTION 6 WHII: 18

FRISTER NON SECTION AND SECTION ... HODBUR NON SELVING

COVER LETTER

TO:	Amendment Section Division of Corporations
SUE	SJECT:_Resignation
	(Name of Corporation)
DO	CUMENT NUMBER: N08000011597
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Plea	se return all correspondence concerning this matter to the following:
Ca	role Cosenza
	(Name of Person)
Cia	ao Bella; An Italian American Women Society
	(Name of Firm/Company)
518	85 KERNWOOD CT.
	(Address)
PA	LM HARBOR FL 34685
	(City/State and Zip Code)
For	further information concerning this matter, please call:
Car	role Cosenza at (727) 942-6558 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enc	losed is a check for \$35.00 made payable to the Florida Department of State.
Amo Divi Clift 266	tert Address: Endment Section Ision of Corporations Iton Building I Executive Center Circle I Ex

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



, hereby resign as Vice President	
(Fide)	
/omen Society	
orporation)	
corporation organized under the laws of the State of	
ature 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