## NIIO31

(Re	questor's Name)	
(Ad	ldress)	
	dress)	
DA)	aress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nan	~~!
ua)	Siness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
	_	
		<del></del>
Special Instructions to Filing Officer:		
L		

Office Use Only



500349508375

08/10/20--01029--005 \*\*35.00



500 30 750

## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: (Name of Corporation)		
N11031	(Name of Corporation)	
DOCUMENT NUMBER: N11031		
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all correspondence concerning	g this matter to the following:	
ALFONSO ARRAZOLA		
(Name of Person)		
INERNATIONAL TRADE & BUSINESS CENTE	R CONDOMINIUM	
(Name of Firm/Company)		
1700 N. W. 94th AVENUE		
(Address)		
DORAL, FL 33172		
(City/State and Zip Code)		
For further information concerning this ma	tter, please call:	
ALFONSO ARRAZOLA	at (305 992-8870 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35,00 made payab	le to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ROSA DEL DAGO L	PRESIDENT / DIRECTOR, hereby resign as	
<u> </u>	(Title)	
of	SESS CENTER CONDOMINIUM ASSOCIATION, INC.	
(Nar	me of Corporation)	
(Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	<del></del> •	
	(Signatures of resistance of r	
	(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