

(Requestor's Name)	
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TRANSMITTAL LETTER

Division of Corporations LORIDA REGYCLING NUMBER 1 INC (Name of Corporation) DOCUMENT NUMBER: N16000005394 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information/concerning this matter, please call: Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address:

Amendment Section

Division of Corporations 2661 Executive Center Circle Tallahassee. FL 32301

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

. Robelio Rosi	hereby resign as	
	(Title) (CING number /INC Jame of Corporation)	
N16000003394 (Document Number, if known)		
Anbel Klarti	ne?	
ĺ	Doro Ties -	
	(Signature of resigning officer/director)	
	FILING FEE IS \$35.00	O

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314