

N17000002296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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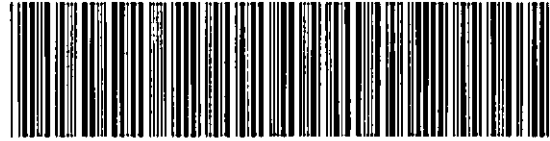
(Business Entity Name)

(Document Number)

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SEP 03 2021
I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CASA DE ADORACION R.E.S.A. EN VICTORIA, INC

(Name of Corporation)

DOCUMENT NUMBER: N17000002296

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

Please return all correspondence concerning this matter to the following:

ANGELO ALBINO

(Name of Person)

HOGAR RESA, INC

(Name of Firm/Company)

224 LAKE VILLA WAY

(Address)

HAINES CITY, FL 33844

(City/State and Zip Code)

For further information concerning this matter, please call:

ANGELO ALBINO

(Name of Person)

at (321) 746-1038

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ANGELO ALBINO, hereby resign as TREASURER
(Title)

of CASA DE ADORACION R.E.S.A. EN VICTORIA, INC
(Name of Corporation)

NI7000002296, a corporation organized under the laws of the State of
(Document Number, if known)

CASA DE ADORACION R.E.S.A. EN VICTORIA, Inc.

Angelo Albino

(Signature of resigning officer/director)

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533 FD

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