

N19 000010474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

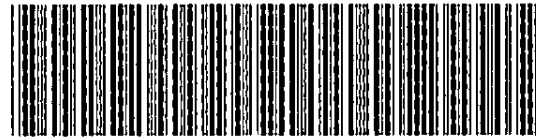
(Business Entity Name)

(Document Number)

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2020 SEP 14 AM 9:51  
SECRETARY OF STATE  
TALLAHASSEE, FL

JQ 10/20/20

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: skillforce consulting  
(Name of Corporation)

DOCUMENT NUMBER: 1190000010474

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

Please return all correspondence concerning this matter to the following:

Kathy Schofield  
(Name of Person)

skillforce consulting  
(Name of Firm/Company)

920 NE 119th St  
(Address)

Miami, FL 33161  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kathy Schofield at ( 714 ) 904 2085  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**

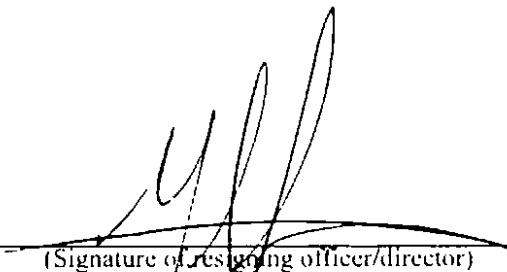
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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, Gerald Solomon, hereby resign as Director, Secretary,  
Treasurer (Title)  
of Skillforce Consulting (Name of Corporation)  
W190000010474 (Document Number, if known), a corporation organized under the laws of the State of  
Florida.

  
(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

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CLERK OF STATE  
TALLAHASSEE, FL