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TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

SUBJECT:	Name of	opice Removal
DOCUMENT I	NUMBER: 000	oppier Removal 100000 2771
The enclosed A	rticles of Amendment and	fee are submitted for filing.
Please return all	correspondence concernin	g this matter to the following:
_	MARIO	Sopena (Name of Person)
_	to picel	Homes & Rulas inc ame of Firm/Company)
_	2019 (1	AMuson St (Address)
_	Hollywin	ity/ State/ and Zip Code)
For further info	rmation concerning this ma	tter, please call:
Man	Name of Person)	at (954) 298-6946 (Area Code & Daytime Telephone Number)
Enclosed is a ch	neck for the following amou	unt:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Amendr Divisior P.O. Bo	Address ment Section of Corporations x 6327 ssee, FL 32314	Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. MARIO SOPEA	JΔ, hereby resign as	Office (Title)
of tropecal	ame of Corporation)	I, me.
(Document Number, if known)	, a corporation organized unde	÷ -
Floreda		O4 APR - SECRETAI VLLAHAS
	Pan	8 PA SEE, F
	Signature of resigning officer/director	STATE LORID

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