

PO0000041137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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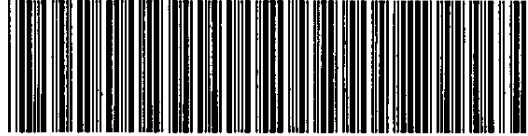
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 12 2016

C. CARROTHERS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cohen /Ruiz P.A.
(Name of Corporation)

DOCUMENT NUMBER: P00000041137

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

Please return all correspondence concerning this matter to the following:

Michele S Primeau

(Name of Person)

(Name of Firm/Company)

110 SE 6th Street, Suite 1700

(Address)

Fort Lauderdale, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Michele S Primeau at (**954**) **579-8075**
(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Michele S. Primeau, hereby resign as Treasurer/Director
(Title)

of Cohen/Ruiz P.A.
(Name of Corporation)

P00000041137, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Michele Primeau
(Signature of resigning officer/director)

Digitally signed by Michele Primeau
DN: cn=Michele Primeau, o=ou,
email=msprimeau@gmail.com, c=US
Date: 2016.04.20 08:03:16 -0400

2016 MAY 10 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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