## P00000072600

(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
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SECKETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: ITALIAN VILLAGE CORPORATION
(Name of Corporation)
DOCUMENT NUMBER: P00000072600
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
LOUIS A. SUPRASKI, ESQ.
(Name of Person)
LOUIS A. SUPRASKI, P.A.
(Name of Firm/Company)
2450 NE MIAMI GARDENS DRIVE, 2ND FL
(Address)
MIAMI, FL 33180
(City/State and Zip Code)
For further information concerning this matter, please call:
LOUIS A. SUPRASKI, ESQ. at ( 305 ) 792-0060 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, hereby resign asDIRECTOR	
(Title)	
ation)	
, a corporation organized under the laws of the State of	

(Signature of resigning officer/director)

2007 JAN 29 AM II: 3: SECRETARY OF STATE

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