

PD00000102807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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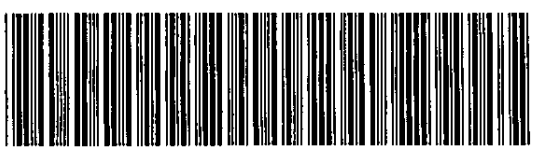
(Business Entity Name)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Compuwiz of South Florida, INC.
(Name of Corporation)

DOCUMENT NUMBER: P00000102807

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

Please return all correspondence concerning this matter to the following:

Nora Martinez

(Name of Person)

Compuwiz Group of South Florida, INC.
(Name of Firm/Company)

4009 N.W. 79th. Avenue

(Address)

Doral, FL 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

Nora Martinez at (**305**) **710-5500**
(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, Nora A. Martinez, hereby resign as President
(Title)

of Compuwiz Group of South Florida, INC.
(Name of Corporation)

P00000102807, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

FILED
2016 OCT 24 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:

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