

PO1000028354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

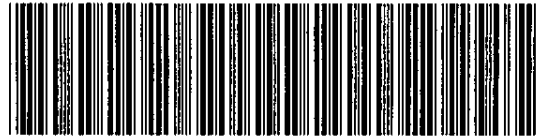
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2600 OCT 27 PM 12:33

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LOPEZ-SAINZ ENTERPRISES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000028354

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

Please return all correspondence concerning this matter to the following:

RUBEN LOPEZ
(Name of Person)

LOPEZ-SAINZ ENTERPRISES, INC
(Name of Firm/Company)

1068 N. WASHINGTON BLVD.
(Address)

SARASOTA, FL 34236
(City/State and Zip Code)

For further information concerning this matter, please call:

RUBEN LOPEZ at (941) 685-1409
(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**

I, MANUEL LUIS SAINZ, hereby resign as DIRECTOR
(Title)

of LOPEZ-SAINZ ENTERPRISES, INC.
(Name of Corporation)

P01000028354, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

x 
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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