

PO 1000007972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

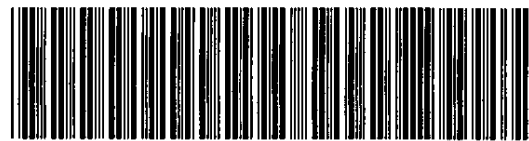
(Business Entity Name)

(Document Number)

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OCT -9 2014

R. WHITE

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TALLAHASSEE, FLORIDA  
OCT -7 AM 11:42

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ST JUDAS PEACE & CARE INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000077972

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

Please return all correspondence concerning this matter to the following:

ELIZABETH BUZZI  
(Name of Person)

ST JUDAS PEACE & CARE INC  
(Name of Firm/Company)

15135 NW 88 CT  
(Address)

MIAMI LAKES FL 33018  
(City/State and Zip Code)

For further information concerning this matter, please call:

ELIZABETH BUZZI at ( 305 ) 828-2003  
(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

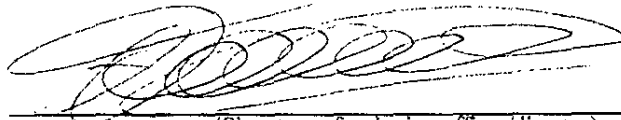
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, FIDEL BUZZI, hereby resign as VD  
(Title)

of ST JUDAS PEACE & CARE INC,  
(Name of Corporation)

P01000077972, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA.

  
(Signature of resigning officer/director)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

74 OCT -7 AM 11:42

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