

P0200000 1105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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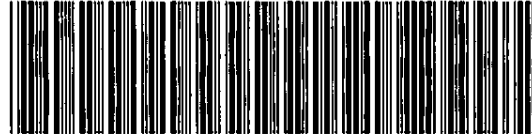
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JAN -7 PM 2:04

JAN 13 2015
T. CARTER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MICHAEL PELLEGRINO, INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000001105

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 PELLEGRINO
(Name of Person)

MICHAEL PELLEGRINO, INC.
(Name of Firm/Company)

5525 NORTH MILITARY TRAIL, #1310
(Address)

BOCA RATON, FLORIDA 33496
(City/State and Zip Code)

For further information concerning this matter, please call:

ELIZABETH PELLEGRINO at (561) 241-8441
(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**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

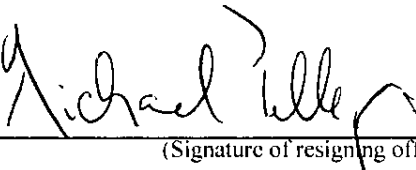
15 JAN -7 PM 2:04

I, MICHAEL PELLEGRINO, hereby resign as DIRECTOR, PRESIDENT, AND SECRETARY
(Title)

of MICHAEL PELLEGRINO, INC.
(Name of Corporation)

P02000001105, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 1/1/2015
(Signature of resigning officer/director)

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