

PO2 000003935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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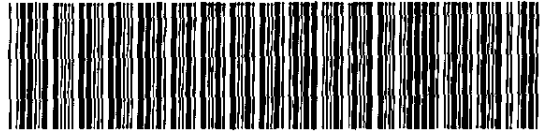
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ORLANDO'S PAINTING SERVICE, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P02000003935

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

Please return all correspondence concerning this matter to the following:

ORLANDO IRAOLA

(Name of Person)

ORLANDO'S PAINTING SERVICE, INC.

(Name of Firm/Company)

536 EAST 62 STREET

(Address)

HIALEAH, FL 33013

(City/State and Zip Code)

For further information concerning this matter, please call:

IGNACIO J. ABELLA, CPA

(Name of Person)

at ( 305 ) 222-0400

(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  
409 E. Gaines Street  
Tallahassee, FL 32399

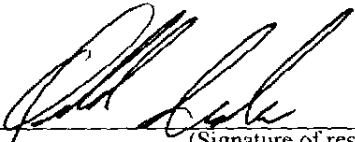
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ORLANDO IRAOLA, hereby resign as PRESIDENT  
(Title)

of ORLANDO'S PAINTING SERVICE, INC.  
(Name of Corporation)

P0200003935, 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

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**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