

P02000043863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

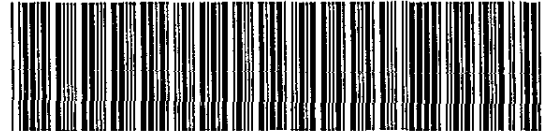
(Business Entity Name)

(Document Number)

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resignation
of
officer

FILED
03 APR -2 PM 3 15
TALLAHASSEE, FLORIDA

ASR
4/9/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Raycco Trim, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P02000043863

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

Please return all correspondence concerning this matter to the following:

CESAR AUGUSTO LEAL

(Name of Person)

Raycco Trim, Inc.

(Name of Firm/Company)

2301 SE 4th Street Apt #16

(Address)

Boynton Beach, FL 33435

(City/State and Zip Code)

For further information concerning this matter, please call:

Cesar Leal at (561) 305-4460
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

03 APR -2 PM 3:15

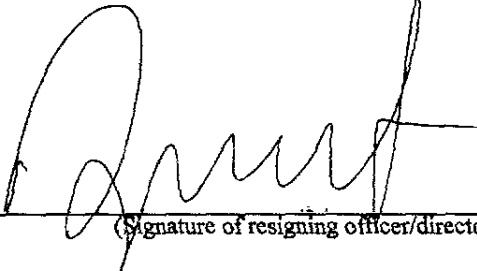
**STATE
TALLAHASSEE, FLORIDA**

I, Cesar Augusto Leal, hereby resign as Director
(Title)

of Raycco Trim Inc.
(Name of Corporation)

P02000043863, 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

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

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