## P0200094077

(Rec	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Mara Rosignation

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MC S 9 JONE O UNLINITED, IC
DOCUMENT NUMBER: PO 20000 94077
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Person)
(Name of Firm/Company)
P.O. Bo × 23942 (Address)
(Address)
Oakland Park FL 33334 (City/State and Zip Code)
(,
For further information concerning this matter, please call:
Caulos L. Ortiz at (954) 336. 5735 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



CARLOS C. ONTIZ	, hereby resign as VP
	(Title)
of MC SQUARED UNLIN	WITED INC.
(Name of Cor	poration)
(Document Number, if known), a c	corporation organized under the laws of the State of
Florida .	
Josh 1 de	·G
(Signate	ure 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