

P03000015519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

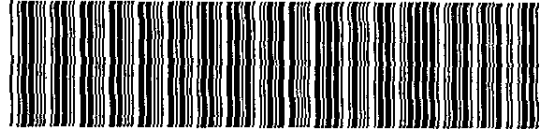
(Business Entity Name)

(Document Number)

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05 MAR 25 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

File 3-25-05/ao

ALICIA M. ALONZO
19600 SW 110 COURT
APT 211
MIAMI, FLORIDA 33157

June 6, 2004

Amendment Section
Division of Corporations
PO BOX 6327
Tallahassee, Florida 32314

Re: New Ideas Tile, Inc.
DOCUMENT NUMBER: P03000015519
Resignation of: OFFICER

Dear Division of Corporations:

Please find enclosed the Resignation of Officer (Amendment) and filling fee in the amount of \$35.00, payable to the Department of State - for the aforementioned Florida Corporation.

If you require any additional information, please do not hesitate to call 321.624.2176

Kind regards,


ALICIA M. ALONZO

AMA/fm

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **NEW IDEAS TILE, INC.**
(Name of Corporation)

DOCUMENT NUMBER: **P03000015519**

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

Please return all correspondence concerning this matter to the following:

ALICIA M. ALONZO
(Name of Person)

(Name of Firm/Company)

19600 SW 110 COURT, APT 211
(Address)

MIAMI, FL 33157
(City/State and Zip Code)

For further information concerning this matter, please call:

ALICIA ALONZO at **(321) 624-2176**
(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

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TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ALICIA M. ALONZO, hereby resign as PRESIDENT/SEC.
(Title)

of NEW IDEAS TILE, INC.
(Name of Corporation)

P03000015519, a corporation organized under the laws of the
(Document Number, if known)

FLORIDA

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TALLAHASSEE, FLORIDA

Alicia Alonzo
(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