

P03000031790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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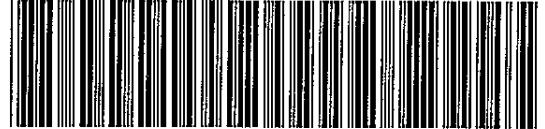
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TRANSDON MONEY TRANSMITTER CORP.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

MARILENA OCTAVIO
(Name of Person)

TRANSDON MONEY TRANSMITTER CORP.
(Name of Firm/Company)

17110 AQUIDA PARKWAY SUITE #1
(Address)

WESTON FL 33326
(City/State and Zip Code)

For further information concerning this matter, please call:

MARILENA OCTAVIO at (954) 8886160
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
05 NOV 17 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, GEORGE L. REEVES, hereby resign as DIRECTOR
(Title)

of TRANSDON MONEY TRANSMITTER CORP.
(Name of Corporation)

P03000031790, 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