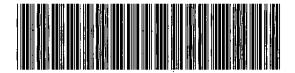
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(R	equestor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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(B	usiness Entity Name)	<del> </del>				
(Document Number)						
Certified Conies	Certificates of	Statue				
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Special Instructions to	Filing Officer					
Opecial instructions to	Tilling Officer.	1				
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## **COVER LETTER**

TO:		t Section Corporations	•			
SUBJ	TECT:	iera	Col	Name of Corpor	TIOH.	
DOC'	UMENT NU	MBER: P	0300	00 4351	3	·
The e	nclosed Office	er/Director Re	esignation for	or a Corporation	n and fee are su	bmitted for filing
Please	e return all cor	respondence	concerning	this matter to tl	ne following:	
	MIHAI	L Pi	Rico Person)	P		
	FRA				-	
				Drive	<u>-</u>	
B	oca Ra	Tou City/State and	F 1 3	53498.	-	
For fu	urther informa	tion concerni	ing this matt	er, please call:		
M	ihail T	me of Person)	<u>&gt;</u>	at ( 305	297 le & Daytime Te	6428 elephone Number)
Enclo	osed is a check	c for \$35.00 n	nade payabl	e to the Florida	Department of	State.

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

CR2E044(08/05)

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Vice President
er the laws of the State of
7
SECRE TALLAH
FILE MAR 27 I RETARY OF HASSEE P

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

FILING FEE IS \$35.00

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