

PO3000047742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TO: Amendment Section
Division of Corporations

SUBJECT: Altinea Funding, Inc
(Name of Corporation)

DOCUMENT NUMBER: P03000047742

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

Please return all correspondence concerning this matter to the following:

Elizabeth Ann
(Name of Person)

(Name of Firm/Company)

9703 N. New River Canal Rd. #104
(Address)

Tallahassee, Fla. 32321
(City/State and Zip Code)

For further information concerning this matter, please call:

Elizabeth Ann at (954) 261-4701
(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**

I, Elizabeth Hani, hereby resign as Officer
(Title)

of Artima Feeding, Inc.
(Name of Corporation)

P03000047742, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Elizabeth Hani
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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