

70300069398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000112070320

11/26/07--01011--010 **35.00

FILED

2007 NOV 26 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

q/b
Ref
SL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Rachiele Holdings, Inc
(Name of Corporation)

DOCUMENT NUMBER: P03000069398

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

Please return all correspondence concerning this matter to the following:

Dino Rachiele
(Name of Person)

Rachiele
(Name of Firm/Company)

324 W. Central Parkway #1012
(Address)

Altamonte Springs, FL 32714
(City/State and Zip Code)

For further information concerning this matter, please call:

Dino Rachiele at (407) - 496-3596
(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, Maria Rachiele, hereby resign as D (Title)

of Rachiele Holdings, Inc
(Name of Corporation)

P03000069398, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Maria Rachiele
(Signature of resigning officer/director)

2007 NOV 26 PM 3:12
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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