

PO3000108966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

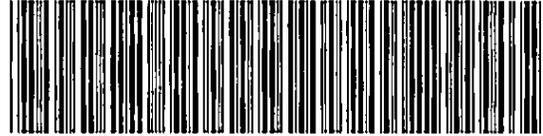
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG 30 PM 2:47
CLERK OF STATE
TALLAHASSEE, FL

FILED

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SEP - 2021

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Lissette H. Morales

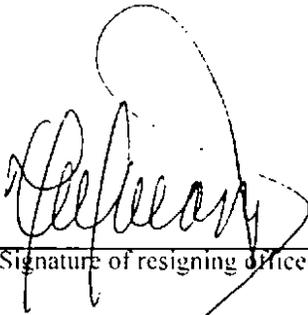
Treasurer

I, L., hereby resign as _____
(Title)

Teide Corp.

of _____
(Name of Corporation)

_____, 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

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