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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MÀIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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OFF. PRS.

Brown 9-20-11

Please I Don't want this

Person Ivon Olmo in the

Corporation, If this is not the

form please contain me at

786-328-6246 and Direct me

With the rock from.

Thank You

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Pobesto Con Crete Finish Inc (Name of Corporation)
DOCUMENT NUMBER: PO3000 11 8203
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tyon Olmo (Name of Person)
Prober to Concrete tini8h tre (Name of Firm/Company)
BBO E GLame (Address)
Hialeah FL 33013 (City/State and Zip Code)
For further information concerning this matter, please call:
Tyon Olmo at (786) 328-6246 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable 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

, Ivon Olmo, hereby resign as Vice Presider	<u>1+</u>
of Proberto Concrete Finish Inc (Name of Corporation)	- '
POSO 118203, a corporation organized under the laws of the State of (Document Number, if known)	
Horida.	e septemble
LANASSI ARY	
(Signature of resigning officer/director)	Ö

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