P03000133924

(Re	equestor's Name)						
(Ad	ldress)						
(Ad	ldress)						
(Cit	y/State/Zip/Phone	÷#)					
PICK-UP	☐ WAIT	MAIL					
(Bu	siness Entity Nan	ne)					
(Document Number)							
Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						

Office Use Only



600041164596

06 19 76 -- 1007 -- 100 **35,00

TALLAHASSEE.

Veces El DBID

OL SEP 23 MILL

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: MALTESE ELECTNICAL CONTRACTORS (Name of Corporation)
DOCUMENT NUMBER: PO3000/33924
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOHN MACTESE (Name of Person)
MALTESE ELECTAICAL CONTRACTORS CORP (Name of Firm/Company)
2802 VASSA1 ST (Address)
MELBOURNE, FL 32901 (City/State and Zip Code)
For further information concerning this matter, please call:
TOWN MACTESE at (321) 296-6475 (Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	JOHN MALTESE	- 	, hereby resign as_	VICE	PAESI	المرسى (.
	,				(Tide)		
of	MALTESE ELL	ECTAICAL lame of Corporation		TOKS C	CORP.	,	
PO.	SOOO/33924 (Document Number, if known)	, a corpor	ation organized und	er the laws o	of the State of		
	FLORIDA	·			ĪĂĹĹ <i>i</i>	S 40	
					VHASS	SEP 23	S. Managara
	1	.10 (7-		L. C.	A	
	fol	(Signature of r	esigning officer/directo	r)	TATE ORIDA	II: 50	-

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