

PD4DD00010996

(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

077/Die Reg Sig  
MAD 4/6



200031257602

03/31/04--01029--012 \*\*35.00

FILED  
04 MAR 30 AM 9:25  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Jamie Stucco, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P04000010996

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

Please return all correspondence concerning this matter to the following:

Jaime Rodriguez  
(Name of Person)

Jamie Stucco, Inc.  
(Name of Firm/Company)

31731 Niles St.  
(Address)

Sorrento Fl. 32776  
(City/State and Zip Code)

For further information concerning this matter, please call:

Santos Rodriguez at (352) 735-1252  
(Name of Person) (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  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Juan M Munoz, hereby resign as 10% - Share - Officer.  
(Title)

of Jamie Stucco, Inc.  
(Name of Corporation)

P04000010996, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

Juan M Munoz  
(Signature of resigning officer/director)

FILED  
04 MAR 30 AM 9:25  
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