

PD4000024315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

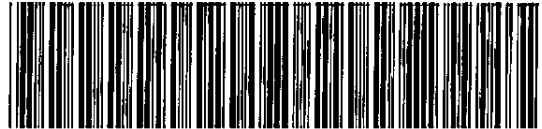
(Business Entity Name)

(Document Number)

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20-05-02-5
5/20/05

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MY DAD'S ICE'S
(Name of Corporation)
DOCUMENT NUMBER: P04000024315

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

Please return all correspondence concerning this matter to the following:

JOSEPH PANTIERI
(Name of Person)

5543 RIVA RIDGE DR
(Name of Firm/Company)
(Address)

Wesley CHAPEL FL 33544
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph Pantieri at (813) 994-5020 - 347-661-7270
(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, Joseph Pantieri, hereby resign as, DIRECTOR
(Title)

of MY DAD'S ICES, Inc.
(Name of Corporation)

P04000024315, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Joseph Pantieri
(Signature of resigning officer/director)

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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