

PO4000030814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

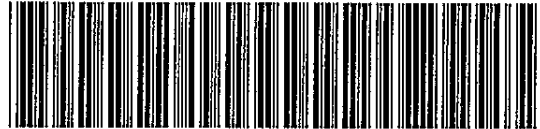
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TALLAHASSEE, FLORIDA

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Ps 8/4/04
L. L. L.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PALAFX BRO'S INC
(Name of Corporation)

DOCUMENT NUMBER: P04000030814

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

Please return all correspondence concerning this matter to the following:

GERMAN PALAFX
(Name of Person)

PALAFX BRO'S INC
(Name of Firm/Company)

6815 48TH AVENUE Apt #1
(Address)

ST PETERSBURG, FL 33709
(City/State and Zip Code)

For further information concerning this matter, please call:

GERMAN PALAFX at (727) 545-3397
(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**

FILED

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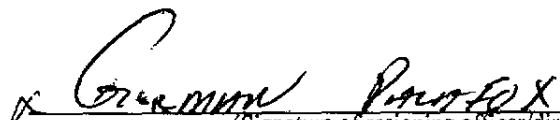
CLERK OF STATE
TALLAHASSEE, FLORIDA

I, GERMAN PALAFOX, hereby resign as PRESIDENT
(Title)

of PALAFOX BRO'S INC
(Name of Corporation)

P04000030814 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