

P04000036149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

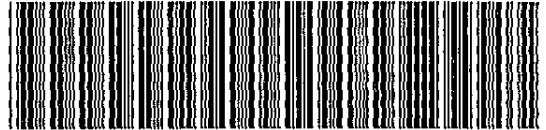
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04 OCT 21 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D resign.

*7/5
10/28*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DIVERSIFIED FORECLOSURE SOLUTIONS CORP.
(Name of Corporation)

DOCUMENT NUMBER: PO 4000036149

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

Please return all correspondence concerning this matter to the following:

CARLOS CARCAS

(Name of Person)

DIVERSIFIED FORECLOSURE SOLUTIONS CORP

(Name of Firm/Company)

8700 W. FLAGLER ST SUITE 165

(Address)

MIAMI, FL. 33174

(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS CARCAS

(Name of Person)

at (305-) 819-0313

(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
04 OCT 21 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ALEX CASTILLO, hereby resign as PRESIDENT
(Title)

of DIVERSIFIED FORECLOSURE SOLUTIONS CORP.
(Name of Corporation)

PO 4000036149, 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