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Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: NINO DAYWALL CORP. (Name of Corporation) DOCUMENT NUMBER: PO400044051
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person) NITU BREYWALL COLF (Name of Firm/Company)
8437 HETTO Rd (Address)
JAX, Fc. 322 YY (City/State and Zip Code)
For further information concerning this matter, please call:
REFUSCIO CLUSTEIN at (904), 779-2777 (Name of Person) (Area Code & Daytime Telephone Number)
Englaced 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

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TALLAHASSFE, FLORIDA

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1. TEDRO ANT	ouio higus	ELOA, hereby resig	en as Silectel	
			(Title)	
of NINO De				,
^	(Name of	Corporation)		,
(Document Number,		, a corporation organize	ed under the laws of the State o	f
FLORIDA				

Podro ANTONIO FIGUEROA
(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