

P04000050527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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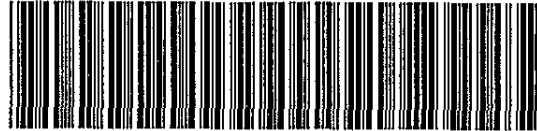
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 32399

09/06/05--01018--006 **35.00

ff Resign

C. Coulllette SEP 13 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TORINO WOODS FURNITURE, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000050527

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

Please return all correspondence concerning this matter to the following:

JONATAN FRENCIA
(Name of Person)

TORINO WOODS FURNITURE, INC.
(Name of Firm/Company)

8348 NW 66TH. STREET
(Address)

MIAMI, FL 33166
(City/State and Zip Code)

For further information concerning this matter, please call:

JONATAN FRENCIA at (305) 718-4909
(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

DE : HERRAJES TORINO

NO. DE TEL : 47294195

03 SEP. 2005 10:05 P1

FROM :

FAX NO. : 3057184429

Sep. 01 2005 04:18PM P1

09/01/2005 14:45 3052661107

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PAGE 02

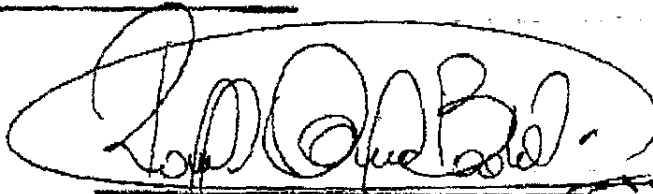
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RAFAEL CLAUDIO MADRIZ, hereby resign as DIRECTOR (Title)

of TORINO WOODS FURNITURE, INC.
(Name of Corporation)

FD4000030327, 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

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