

PD40000064404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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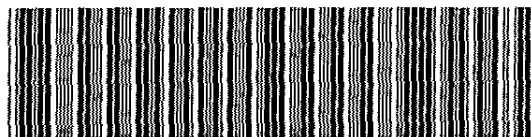
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

1/5 6/6/05
O/D 65.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALPHA WIPING CLOTH CORP.
(Name of Corporation)

DOCUMENT NUMBER: P04000064404

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

Please return all correspondence concerning this matter to the following:

NOEL A. LAZO

(Name of Person)

(Name of Firm/Company)

9400 SW 54 STREET

(Address)

MIAMI FL, 33165

(City/State and Zip Code)

For further information concerning this matter, please call:

NOEL A , LAZO

(Name of Person)

at (305) 630-2866

(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**

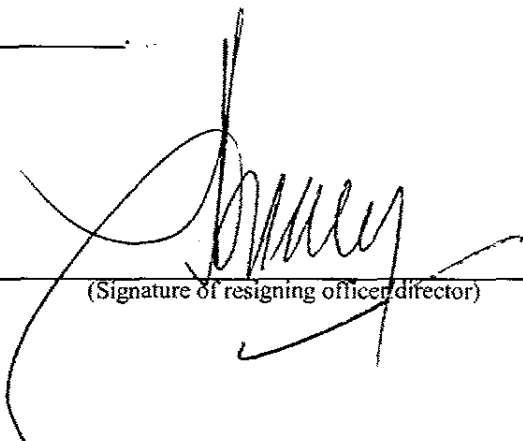
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05 JUN -3 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, NOEL A. LAZO, hereby resign as VICE-PRESIDENT
(Title)

of ALPHA WIPING CLOTH CORP
(Name of Corporation)

704000064404, 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