60H0000 PH1P

(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
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ertified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		





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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: RESIGNATIO	N AS VICE PRESIDENT (Name of Corporation)
DOCUMENT NUMBER:_	` '
The enclosed Officer/Directo	or Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the following:
ALICIA MASUD	
(Name	of Person)
Dali Furniture	Firm/Company)
17906 SW 13 CT	
(Ac	ddress)
PEMBROKE PINES FL 3	33029
(City/State	and Zip Code)
For further information conc	erning this matter, please call:
ALICIA MASUD	at (954) 815-1764
(Name of Pers	at (954) 815-1764 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ALICIA MASUD	, hereby resign as VP
	(Title)
of DALI FURNITURE INC	
(Name o	f Corporation)
P0400064767 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	O9I TALL
	O9 MAY 15 AM II: 28 ALLAHASSEE, FLORIDA Ignature of lesigning 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