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| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT:E&A SHOTCRETE, INC. |
|--|
| (Name of Corporation) |
| DOCUMENT NUMBER: P04000094945 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| YOSLANDY FRAGA |
| (Name of Person) |
| E&A SHOTCRETE, INC. |
| (Name of Firm/Company) |
| 3665 NW 102ND STREET |
| (Address) |
| MIAMI, FL 33147 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| ERYEL BOSQUE 210-9078 |
| ERYEL BOSQUE at (786) 210-9078 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 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

| | A / DIRECTOR RESIGNATION OR A CORPORATION | CONTRACTOR SEE OF SEE O |
|---|---|--|
| I, YOSLANDY FRAGA | , hereby resign as SECRETARY (Title) | SE POSTORIOS. |
| © A SHOTCRETE, INC. (Nan | ne of Corporation) | , |
| P0400094945 (Document Number, if known) | , a corporation organized under the laws of the State | of |
| FLORIDA | · | |
| | | |
| <u> </u> | (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