P04000104715

(Requestor's	s Name)
(Address)	
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TRANSMITTAL LETTER

TO:	2: Amendment Section Division of Corporations							
SUBJI	ECT:_	CARIBBEAN	STRUCTU	JRAL SY	STEMS	(1)	CC.	
				(INan	e of Corp	orati	ion)	
DOCU	JMEN'	Γ NUMBER:_	P040001	.04775				
The en	closed	Officer/Directo	r Resignati	on for a	Corporati	on a	ind fee are su	ubmitted for filing.
Please	return	all corresponde	nce concer	ning this	matter to	the	following:	
	LARRY	WECHSLER						
		(Name	of Person)			_		
	CARIE	BEAN STRUC			, INC.	1		
		(Name of F	irm/Compa	ny)				
	1515	UNIVERSITY	Z DRIVE	SUITE	115			
		(Ac	ldress)			_		
	CORA	L SPRINGS,	FL 3307	1				
		(City/State	and Zip Co	de)				
For fur	ther in	formation conc	erning this	matter, pl	lease call:	:		
L	ARRY	WECHSLER		at (954)	796-8076	lephone Number)
		(Name of Pers	on)		(Area Co	odé 8	& Daytime Te	lephone Number)
Enclos	ed is a	check for \$35.0	00 made pay	yable to t	he Florida	a De	epartment of	State.
Amend Divisio P.O. Be	ox 6327	ection orporations	Ar Di 26	61 Execu	ress: t Section Corporati tive Cento , FL 3230	er C	ircle	

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. ARTHUR M. A	APPLEGATE	, hereby resign as	VICE PRE	ESIDENT				
		,sy .esig.i us		(Title)				
of CARIBBEAN		SYSTEMS, INC.			,			
	(Name	of Corporation)						
P040001047	75	a cornoration organized und	a corporation organized under the laws of the State of					
(Document Number, if known)		<u></u>						
FLORIDA								
	QQ Q	Signature of resigning officer/director	or)	2017 FEB - 2 PM 12: 20 SEGNATION FLORIDA TALLAMACSEE: FLORIDA				
	F	ILING FEE IS \$35.00		20 20 20 20 20 20 20 20 20 20 20 20 20 2				

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314