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Of RD Cisigo



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TO: Amendment Section Division of Corporations
SUBJECT: The Case Marina & Rostaurant The (Name of Corporation)
DOCUMENT NUMBER: 1-04000 [[434]
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Many Alfard (Name of Person)
(Name of Firm/Company)
4643 Addism St. (Address)
Boca Raton II 33428 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (56) 213 557 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

of The Care Mary + Restaurant, Dr.

(Name of Corporation)

(Document Number, if known)

OFFICER / DIRECTOR RESIGNATION

(Name of Corporation)

(Document Number, if known)

OFFICER / DIRECTOR RESIGNATION

(Name of Corporation)

(Document Number, if known)

(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