

P04000138074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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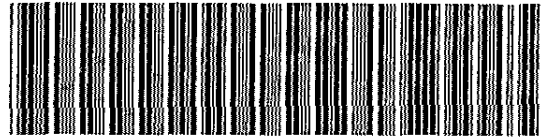
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: L.E.L. Kitchen Custom Cabinets, Corp.
(Name of Corporation)

DOCUMENT NUMBER: P-4000138074

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

Please return all correspondence concerning this matter to the following:

LUPE COTO

(Name of Person)

L.E.L. KITCHEN CUSTOM CABINETS, CORP

(Name of Firm/Company)

4840 48TH STREET WEST APT. 614

(Address)

BRADENTON, FLORIDA 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

LUPE COTO

(Name of Person)

at (305) 970-6016

(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**


I, LUPE COTO, hereby resign as TREASURY
(Title)

of L.E.L. KITCHEN CUSTOM CABINETS, CORP.
(Name of Corporation)

P04000138074, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA

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TALLAHASSEE, FLORIDA

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* 
(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