## PD 4000142069

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200066954212

03/06/06--01043--002 \*\*35.00

FILED

06 MAR -6 PH 12: 34

1 STATE FLORIDI

MDi Resor H 3/14/26

## **COVER LETTER**

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

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Carlos A. Sepulvede hereby resign as Vice - Pr	reside	<u>m</u>	
of Jms Tile Dnc. (Name of Corporation)		,	
(Document Number, if known) a corporation organized under the laws of the	e State of		
Florida			
(Signature of resigning officer/director)	SLUBCIARY OF STATE	08 MAR -6 PH 12: 34	FILED

## 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