

PO4000167907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

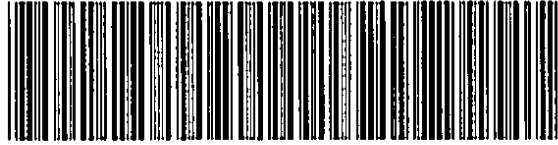
(Business Entity Name)

(Document Number)

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08/26/2022 12:23 PM

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2022 AUG 26 PM 12:23  
TALLAHASSEE, FL  
SOLICITOR GENERAL'S OFFICE

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MOLINA'S BAKERY INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000167907  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

A PESTANO

\_\_\_\_\_  
(Name of Person)

BUSINESS SERVICES & SUPPORT NETWORK CORP

\_\_\_\_\_  
(Name of Firm/Company)

4612 N HIATUS RD

\_\_\_\_\_  
(Address)

SUNRISE FL 33351

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

A PESTANO

\_\_\_\_\_  
(Name of Person)

at ( 954 ) 578-0016  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

**2022 AUG 26 PM 12: 23**

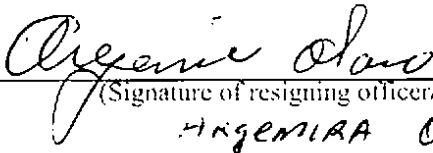
**SECRETARY OF STATE  
TALLAHASSEE, FL**

I, ARGEMIRA OLANO, hereby resign as DIRECTOR  
(Title)

of MOLINA'S BAKERY INC  
(Name of Corporation)

P04000167907, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)  
ARGEMIRA OLANO

**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