

P04000170333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

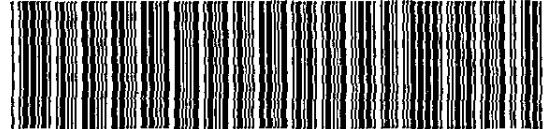
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06 APR 21 PM 2:00
STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: METRO TRANSLATION AND INTERPRETING SERVICES, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO4000170333

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

Please return all correspondence concerning this matter to the following:

MILAGROS ROSA

(Name of Person)

Metro Translation and Interpreting Services, Inc.

(Name of Firm/Company)

9140 SW 107 Place

(Address)

Bellevue, FL 34420

(City/State and Zip Code)

For further information concerning this matter, please call:

Milagros Rosa

(Name of Person)

at (352) 380-6857

(Area Code & Daytime Telephone Number)

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:

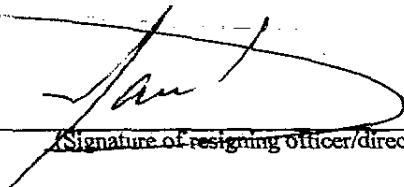
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, EDUARDO CANELON, hereby resign as S/T
(Title)

of METRO TRANSLATION & INTERPRETING SERVICES, INC.
(Name of Corporation)

PO400017033, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

FILED
06 APR 21 PM 21 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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