P04000170559

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	_
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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

x4/17

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: NEW MOON TI, INC. (Name of Corporation) DOCUMENT NUMBER: P0400170559
DOCUMENT NUMBER: P0400170559
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARC Weinberg (Name of Person)
(Name of Firm/Company)
16100 NE 16th AVE SVITEB
(Address)
N. M. B., FL 33/62 (City/State and Zip Code)
For further information concerning this matter, please call:
Mure Weinber at (305) 949-5999 (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 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 APR 16 PM 2:41

MARC	Weink	£15	, hereby resign	n as	STD	itle REGIS	the Age
	NEW	Moo N ame of Corpora	IV, I	NC.			.,
Po yooo (Document Nur	70559	, a corpo	oration organize	d under the	e laws of the	e State of	
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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