

P05000009434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

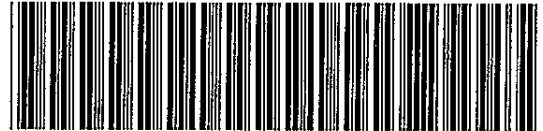
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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✓ 0/D Resign.
3/2/05
DC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISCONSYE PAINTING CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: PO5000009434

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

Please return all correspondence concerning this matter to the following:

JOSEFINA SURIEL

(Name of Person)

DISCONSYE PAINTING CORP.

(Name of Firm/Company)

2318 N.W. 35TH STREET

(Address)

MIAMI, FL. 33142

(City/State and Zip Code)

For further information concerning this matter, please call:

ARACELY ARIAS

(Name of Person)

at (305) 796-2638

(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, JOSEFINA SURIEL, hereby resign as OFFICER/TREASURER
(Title)

of DISCONSYE PAINTING CORP
(Name of Corporation)

P05000009434, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X *Josefina Suriel*
(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

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DIVISION OF CORPORATIONS
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