

PD5000019611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

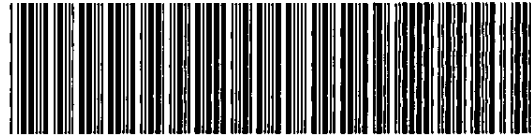
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

OD/RES
@ 11/23/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: adlas enterprises, inc.

(Name of Corporation)

DOCUMENT NUMBER: p05000019611

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

Please return all correspondence concerning this matter to the following:

JOANNY NIN

(Name of Person)

ADLAS ENTERPRISES INC.

(Name of Firm/Company)

910 E. CREST PL

(Address)

TAMPA, FL 33604

(City/State and Zip Code)

For further information concerning this matter, please call:

HENRY RAMIREZ

(Name of Person)

at (**813**) **4464946**

(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

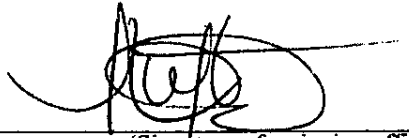
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOANNY NIN, hereby resign as VP
(Title)

of ADLAS ENTERPRISES INC
(Name of Corporation)

P05000019611, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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