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DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PARADISE COAST PROFESSIONALS (Name of Corporation)
DOCUMENT NUMBER: POSODO 23205
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOF CIRILLO JR. (Name of Person)
PARADISE CAST PRO. (Name of Firm/Company)
30 FAIRWAY RO (Address)
LOTONDA WEST 5, 33947 (City/State and Zip Code)
For further information concerning this matter, please call:
DAMON Run Yon at (741) 855-113 (Name of Person) at (741) 855-113 (Area Code & Daytime Telephone Number)
Final acad is a check for \$25.00 made powerly to the Florida Department of State

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



1, JOF CIRILLO)R hereby resign as	SEC.	Dir
_			(Title)
of TARADISE CAS	ST PROFESS.	IONAL_	Inc
(Name of		· · · · · · · · · · · · · · · · · · ·	. ⁿ .
Posoco 2320 s (Document Number, if known)	_, a corporation organized u	nder the laws of t	he State of
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