

PD5000032939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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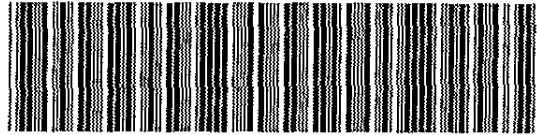
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SAMAOS STUCCO OF CENTRAL FLORIDA INC
(Name of Corporation)

DOCUMENT NUMBER: P05000032939

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

SALVADOR FIGUEROA

(Name of Person)

SAMAOS STUCCO OF CENTRAL FLORIDA INC

(Name of Firm/Company)

~~XXXXXXXXXX~~
(Address)

180 N. W. 1st St

~~XXXXXXXXXX~~
(City/State and Zip Code)

DeFuniak Springs FL 32435

For further information concerning this matter, please call:

SALVADOR FIGUEROA

(Name of Person)

at (850) 260-6715

(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**

FILED

2007 AUG 14 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, SALVADOR FIGUEROA, hereby resign as PRESIDENT
(Title)

of SAMAOS STUCCO OF CENTRAL FLORIDA INC
(Name of Corporation)

P05000032939, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X Salvador Figueroa
(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