## P05000059885

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETATE OF STATE



T. Smith

MAY 20 285

## TRANSMITTAL LETTER

SUBJECT: IBARRA'S LA	THING & STUCCO, INC (Name of Corporation)
. DOCUMENT NUMBER:_	
DOCUMENT NUMBER:_	
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the following:
MARISOL IBARRA	of Person)
IBARRA'S LATHING & S' (Name of F	TUCCO INC
2715 5TH ST EAST	Idress)
BRADENTON, FL 34208	and Zip Code)
	erning this matter, please call:
MARISOL IBARRA (Name of Pers	at ( 941 ) 586-0353  (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	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

TO: Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

PRESIDENT

... ELIDA IBARRA

1.	, hereby resign as
	(Title)
of_IBARRA'S LATHING & STU	· · · · · · · · · · · · · · · · · · ·
(INa	me of Corporation)
P05000059885	a corporation organized under the laws of the State of
(Document Number, if known)	- •
FLORIDA	en german en
Eld	C JOANS (Signature of resigning officer/director)  TALLAHASSEE.  R

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