

PO5000105558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

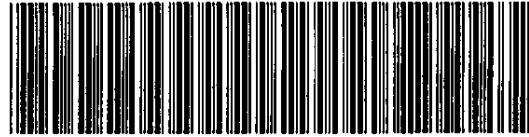
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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500211280825

*Resignation
to officer*

08/26/11--01019--005 **35.00

FILED
2011 AUG 26 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
8/29/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ESCOBAR CARPETS INC
(Name of Corporation)

DOCUMENT NUMBER: P05000105558ANA

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

Please return all correspondence concerning this matter to the following:

CESAR E ESCOBAR

(Name of Person)

ESCOBAR CARPETS INC

(Name of Firm/Company)

1003 E BOUGAINVILLEA AVE APT A

(Address)

TAMPA FL 33612

(City/State and Zip Code)

For further information concerning this matter, please call:

CESAR E ESCOBAR

(Name of Person)

at (813) 317-4359

(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

**2011 AUG 26 PM 4: 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, ANA S LINARES, hereby resign as SECRETARY
(Title)

of ESCOBAR CARPETS INC,
(Name of Corporation)

P05000105558, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Ana S. Linares
(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