## P06000005544

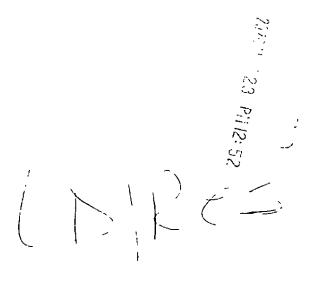
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PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Name)	
(5.5		
(DC	ocument Number)	
Certified Copies	_ Certificates of	Status
0	Ell's officer	
Special Instructions to	Hiling Officer:	
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Office Use Only



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JAN 0-9 322. I ALBRITTON

## TRANSMITTAL LETTER

	Amendment Section Division of Corporations	,		
SUB.	STAR GIFTS CARD CORP & 1	(1-11c)		
		(Name of Co	rporation)	
DOC	UMENT NUMBER: P06000005544	···		
The e	nclosed Officer/Director Resignation	on for a Corpora	ation and fee are submitted for filing	
Pleas	e return all correspondence concern	ing this matter	to the following:	
MAR	CELO NETTO			
	(Name of Person)		<del></del>	
STAR	GIFTS CARD CORPCIENT			
	(Name of Firm/Compan	y)	<del></del>	
965 S	OUTH SHORE DRIVE			
	(Address)	<del>-</del>	<del></del>	
MIAN	11 BEACH, FLORIDA 33141			
	(City/State and Zip Cod	e)	<del></del>	
For fi	arther information concerning this r	natter, please ca	all:	
MAR	CELO NETTO	305	496-6504 ) Code & Daytime Telephone Number)	
	(Name of Person)	(Area	Code & Daytime Telephone Number)	
Enclo	osed is a check for \$35.00 made pay	able to the Flor	ida Department of State.	
	Mailing Address:		et Address:	
	Amendment Section		Amendment Section	
	Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
	Tallahassee, FL 32314		5 N. Monroe Street, Suite 810	
	1 difand5500, 1 L 32314		lahassee, FL 32303	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

MARCELO C. NETTO I.	VP hereby resign as	
1.	. hereby resign as(Title)	
STAR GIFTS CARD CORP C + HTH	cal	
(Nan	ne of Corporation)	
P0600005544 (Document Number, if known)	, a corporation organized under the law	s of the State of
FLORIDA	·	
	(Signature of resigning officer/director)	
		23 PH 12

Make checks payable to Florida Department of State and mail to:

**FILING FEE IS \$35.00** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314