Powwood

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



800286365638

05/31/16--01045--014 **35.00

MERCHAY 31 PH 12: 23

JUN 03 2016 R. WHITE

TRANSMITTAL LETTER

Division of Corporations GC4 ASSOCIATES, INC (Name of Corporation) DOCUMENT NUMBER: P06000009000 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HERIBERTO CARRILLO (Name of Person) GC4 ASSOCIATES, INC (Name of Firm/Company) 2540 SW 74 TERRACE (Address) **DAVIE**, **FL** 33317 (City/State and Zip Code) For further information concerning this matter, please call: LINA CARRILLO (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

P.O. Box 6327

Amendment Section Division of Corporations

Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, HERIBERTO CARI	RILLO, hereby resign as VICE-PRESIDENT	
	(Title)	
of GC4 ASSOCIATES		
(Name	of Corporation)	
P06000009000	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
		

Heriberto Carrillo Digitally signed by Heriberto Carrillo Date: 2016.05.23 21:29:08 -04'00'

(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