P06000010457

(Requestor's Name)			
(Address)			
(Address)			
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





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SECRETARY OF STAIL TALLAHASSEE, FI ONIN.

FAR



COVER LETTER

	Amendment Section Division of Corporations	
SURIFC	CCT: AC CAPITAL CONSTRUCTION CORP	
DODGEC	(Name of Corporation)	
DOCUM	MENT NUMBER: P06000010457	
The encl	closed Officer/Director Resignation for a Corporation and fee are submitted for	or filing
Please re	return all correspondence concerning this matter to the following:	
CRIST	TIAN FIGUEREDO	
	(Name of Person)	
AC CA	APITAL CONSTRUCTION CORP	
	(Name of Firm/Company)	
4250 S	SW 67th AVENUE # 7	
	(Address)	
MIAMI	1I / FL / 33155	
	(City/State and Zip Code)	
For furth	ther information concerning this matter, please call:	
CRISTI	TIAN FIGUEREDO at (786) 246 - 4508 (Name of Person) (Area Code & Daytime Telephone No	
	(Name of Person) (Area Code & Daytime Telephone No	umber)
Enclosed	ed is a check for \$35.00 made payable to the Florida Department of State.	
Amenda Division Clifton E 2661 Ex	Address: Iment Section On of Corporations Building Executive Center Circle Sassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. CRISTIAN FIGUEREDO	, hereby resign as VP (VICE PRESIDENT)
	(Title)
of_ AC CAPITAL CONSTRUCTION CO	· ·
(Name of Con	poration)
(Document Number, if known), a c	corporation organized under the laws of the State of
FLORIDA	
(Signati	re 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

SECRETARY OF STAIL