

P06000025337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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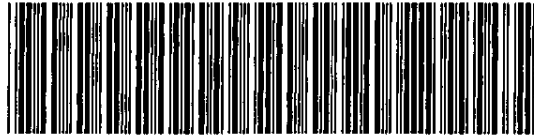
(Business Entity Name)

(Document Number)

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APPROVED
AND
FILED

07 APR 10 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off: Resign.

G. Gouletts APR 12 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALVES TILE INSTALLERS, INC
(Name of Corporation)

DOCUMENT NUMBER: P06000025337

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

Please return all correspondence concerning this matter to the following:

ADILSON GOMES BASTO

(Name of Person)

ALVES TILE INSTALLERS, INC

(Name of Firm/Company)

2893 SEQUIOA LN

(Address)

SARASOTA FL, 34237

(City/State and Zip Code)

For further information concerning this matter, please call:

ADILSON GOMES BASTO at (203) 706.9123
(Name of Person) (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**

I, JAIRO D ALVES, hereby resign as DIRECTOR
(Title)

of ALVES TILE INSTALLERS, INC
(Name of Corporation)

P06000025337, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.

Jairo D Alves
(Signature of resigning officer/director)

APPROVED
AND
FILED
07 APR 10 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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