## 106000034336

(Re	equestor's Name)	·	
(Address)			
(Address)			
(Cit	ry/State/Zip/Phone	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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## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

SUBJECT: Palnbow Pelocation Services, Inc. (Name of Corporation)  POWOWS 31236
DOCUMENT NUMBER: 1 444 556
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MOTTIS GIVNUN (Name of Person)
ACCU-TAX + ACCTO Services inc (Name of Firm/Company)
130 NE 4th Ave
Occifield beach 191 33441 (City/State and Zip Code)
For further information concerning this matter, please call:
MOMIS QUINUM at (954 574-008)  (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

1, Shlomi Lugas	$SSU_{\underline{}}$ , hereby resign as $\underline{}$	ce President and Ireasure
of Rainhow Re	location Service me of Corporation)	
P0600034336 (Document Number, if known)	, a corporation organized under	the laws of the State of
_Florida		
<del>.</del>	(Signature of resigning officer/director)	O6

**FILING FEE IS \$35.00** 

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

Amendment Section Division of Corporations P.O. Box 6227 Tallahassee, Florida 22314