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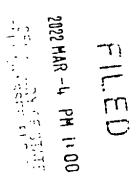
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TRANSMI' TAL LETTER

SUBJECT: GA/AXY SERVICES International, Inc. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: PO6 0000 44 83/
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
NOR ORAMIREZ (Name of Person)
GALAXY SERVICES FATEINATIONAL, INC (Name of Firm/Company)
197215W 242nd ST. (Address)
HomE Stead F1. 3303/ (City/State and Zip Code)
For further information concerning this matter, please call:
Noel o Ramine Z at (305) 778-1035 (Name of Person) at (305) 778-1035 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address: Street Address: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2022 MAR -4 PM 1: 00

1. Fupn Portyondo	. hereby resign as (Title)
of GALAXY SERVICES	International, Inc
(Name o	of Corporation)
DO 6 8000 4483/ (Document Number, if known)	_, a corporation organized under the laws of the State of
_ Florida	_·

(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