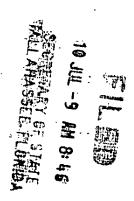
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(Re	equestor's Name)	
(Ac	ldress)	<u> </u>	
(Ac	ldress)		
, (Cr	ty/State/Zip/Pho	ne #)	
PICK-UP	☐ WAIT	MAIL	
•		•	
(Bu	usiness Entity Na	ame)	
Turning (Do	ocument Numbe	г)	
Certified Copies	_ Certificate	es of Status	
Special Instructions to	Filing Officer		_
Special instructions to	Faing Officer.		
	Office Use C)nlv	



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C.COULLIETTE

JUL 1 3 2010

EXAMINER

COVER LETTER

SUBJECT: NICOLOSI ENTERPRISES, INC
SUBJECT: NICOLOSI ENTERPRISES, INC. (Name of Corporation) DOCUMENT NUMBER: PO 600045343
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JUDITH A. HICOLOGI (Name of Person)
Nicologi ENTERPRISES INC
(Name of Firm/Company)
5102 Ludy Rose ct (Address)
Lutz, FL 33558 (City/State and Zip Code)
For further information concerning this matter, please call:
Frank Nicolo51 at (813) Loo 9847 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Frank Nicol	, hereby resign as_	PRESIDENT & DIRECTOR
of Nicologi ENTI	ERPRISES, INC	
_	, a corporation organized unc	
FLORIDA	·	
STATE OF FLORIDA	(Signature of resigning officer/directors)	or)
STATE OF FLORIDA PASCO COUNTY OF The foregoing instrument was acknowledged before me this THE JULY, 20 15 by Frak Nicolais who has produced		OMMISSION COMMISSION C
Fruit Nicolici who has produced type of I.D. or who is personally known to me.	FILING FEE IS \$35.00	#DD 825384 Andred dry C STATE OF THE
NOTARY SIGNATURE		ALTERNATION OF THE PROPERTY OF

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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

