P06000048483

(Re	equestor's Name)	·····
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Off Resign

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TALLAHASSEE, FLORIDA

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: APOLLO HURRICANE SHUTTERS, INC.
(Name of Corporation)
DOCUMENT NUMBER: P06000048483
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Doris D. Meneses
(Name of Person)
John P. Maas, Attorney at Law
(Name of Firm/Company)
44 NE 16th Street
(Address)
Homestead, Florida 33030
(City/State and Zip Code)
For further information concerning this matter, please call:
Doris Meneses at (305) 247-7132, Ext. 15 (Area Code & Daytime Telephone Number)
(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



VICTOR N. SUAREZ	, hereby resign as president
9	Title)
of APOLLO HURRICANE SHU	TTERS, INC.
(Nar	ne of Corporation)
P06000048483 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	·
	Guaresys
	(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