

PO600011579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

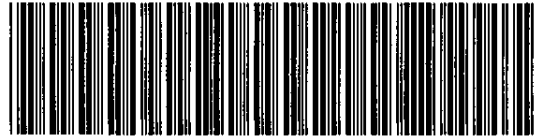
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/03/12--01003--006 **10.00

10/10/12--01008--022 **112.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 14 PM 4:00

OD/Res
10/10/12

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 12evol Discount & Pharmacy Inc
(Name of Corporation)
DOCUMENT NUMBER: P06000111579

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

Please return all correspondence concerning this matter to the following:

CARLOS R. MUÑOZ
(Name of Person)

(Name of Firm/Company)

5260 SW 115 Avenue
(Address)

Miami Florida 33165.
(City/State and Zip Code)

For further information concerning this matter, please call:

Carlos E Muñoz at (954) 483-5247
(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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 3, 2012

CARLOS R. MUNOZ
5260 S.W. 115TH AVENUE
MIAMI, FL 33165

SUBJECT: TREVOL DISCOUNT & PHARMACY INC
Ref. Number: P06000111579

We have received your document for TREVOL DISCOUNT & PHARMACY INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

No document enclosed.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 712A00028622



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2012

CARLOS R. MUNOZ
5260 S.W. 115TH AVENUE
MIAMI, FL 33165

SUBJECT: TREVOL DISCOUNT & PHARMACY INC
Ref. Number: P06000111579

We have received your document for TREVOL DISCOUNT & PHARMACY INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as officer/director for a corporation is \$35 per person resigning.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 412A00025144

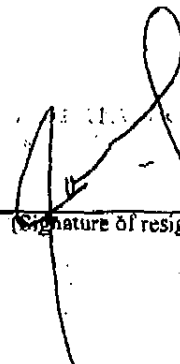
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Carlos R Muñoz, hereby resign as President
(Title)

of Trevol Discount & Pharmacy Inc.
(Name of Corporation)

PO6000111579, a corporation organized under the laws of the State of
(Document Number, if known)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 14 PM 4:00