

P06000141772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700136461237

10/06/08--01032--025 **35.00

FILED

08 OCT -6 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OPR
10/13/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ICOR SERVICES INC
(Name of Corporation)

DOCUMENT NUMBER: P06000141772

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

Please return all correspondence concerning this matter to the following:

JOSE G TORRES

(Name of Person)

ICOR SERVICES INC

(Name of Firm/Company)

3680-B NW 11 ST

(Address)

MIAMI, FL 33125

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE G TORRES

(Name of Person)

at (786) 715-5669

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT -6 PM 1:11

FILED


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DELIA LUGO, hereby resign as PRESIDENT
(Title)

of ICOR SERVICES INC,
(Name of Corporation)

P06000141772, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
08 OCT -6 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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