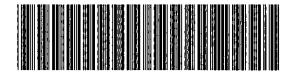
860100001009

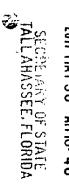
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		:

Office Use Only



400299634814

05/30/17--01010--010 **35.00



C. GOLDEN
JUN 0 5 2017

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Produce in Paradise Inc. (Name of Corporation) DOCUMENT NUMBER: Produce in Paradise Inc.
DOCUMENT NUMBER: PO COO CO TOO S
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Jessica Cabrero. (Name of Person)
Cabrera Law Grasp P.A. (Name of Firm/Company)
275 Fountainbleau Bhol, St 105
Miami, Fl 33177 (City/State and Zip Code)
For further information concerning this matter, please call:
Tessico Colvero at (786) 229-0188 (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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jestica Conexa, hereby resign as V.P.
(Title)
of Produce in Paradise, Inc., (Name of Corporation)
(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

OIT MAY 30 AM IO: 40