

PD70000076671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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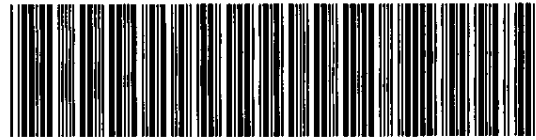
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

DD/Res
@ 4.9.12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IAN TRUMBACH, P. A.
(Name of Corporation)

DOCUMENT NUMBER: P07000076671

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

Please return all correspondence concerning this matter to the following:

ANGELA ABBATIELLO TIRU

(Name of Person)

(Name of Firm/Company)

1515 UNIVERSITY DRIVE, SUITE 208A

(Address)

CORAL SPRINGS, FL 33071

(City/State and Zip Code)

For further information concerning this matter, please call:

ANGELA A. TIRU

(Name of Person)

at (954) 695-4928

(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

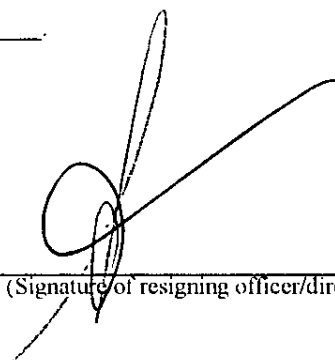
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ANGELA ABBATIELLO TIRU, hereby resign as DIRECTOR/ VICE PRESIDE
(Title)

of IAN TRUMBACH, P. A.
(Name of Corporation)

P07000076671, 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
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