

P08000018654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

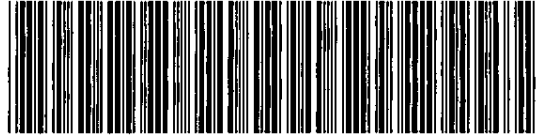
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resignation

TB

11-11-151

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: V.P.L. SERVICES, INC
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

LUIS MENDEZ

(Name of Person)

V .P.L. SERVICES, INC

(Name of Firm/Company)

4 BUXTON LANE

(Address)

BOYNTON BLVD, FL 33426

(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS MENDEZ

(Name of Person)

at (561) 642-4985

(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**

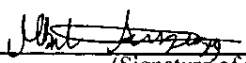
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2008 NOV 10 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MABEL ARANGO, hereby resign as VICEPRESIDENT
(Title)

of V.P.L. SERVICES, INC
(Name of Corporation)

P08000018654, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Y 
(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