P08000020915

(Re	equestor's Name)	
(A	ddress)	
(
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(Ad	ddress)	
(Ci	ity/State/Zip/Phone	#)
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PICK-UP	☐ WAIT	MAIL
_	<u>—</u>	_
(Bi	usiness Entity Name	e)
(De	ocument Number)	
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Certified Copies	Certificates of	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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SECRETARY OF STATE
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: RLI CONSTRUCTION
	(Name of Corporation)
DOG	CUMENT NUMBER: P08000020915
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Pleas	se return all correspondence concerning this matter to the following:
RE	YNALDO SALTO
	(Name of Person)
RLI	I CONSTRUCTION INC.
	(Name of Firm/Company)
289	925 LOOUISIANA RD.
	(Address)
но	MESTEAD, FLORIDA 33033
	(City/State and Zip Code)
For f	further information concerning this matter, please call:
RE	YNALDO SALTO at (786) 339-1888 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clift 2661	et Address: Indiment Section Sion of Corporations On Building Executive Center Circle Shassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2000 AUG -4 AM 9: 26

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I. MARIA G. SALTO	, hereby resign as
	(Title)
of_ R.L.I. CONSTRUCTION INC.	· · · · · · · · · · · · · · · · · · ·
(Name of Corpora	nion)
P08000020915 , a corp	oration organized under the laws of the State of
FLORIDA	
Maria (Signature o	f 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