## P09 0000051879

(F	Requestor's Name)	
()	Address)	
(A	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

Office Use Only



16/21/19--01087--018 \*\*95.00

EN (8 2019

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FIORES CAFE INC (Name of Corporation)
DOCUMENT NUMBER: P08000051878
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
JUAN F LAZO
(Name of Person)
FIORES CAFE INC
(Name of Firm/Company)
2327 South Pine Ave
(Address)
Ocala, FL 34471
(City/State and Zip Code)
For further information concerning this matter, please call:
Romulo Montero (Name of Person)  at (352) 566-8092 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, ANGEL SALAMANCA	, hereby resign as President
of_ FIORES CAFE INC	(Title)
(Name of Corporation P08000051878  (Document Number, if known)  FLORIDA	ration organized under the laws of the State of
(Signature, of	Vestgering 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