## P08000053346

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
·		

Office Use Only



000134112360

resignation 200 oppieer

08/14/08--01025--022 \*\*35.00



8/9/08

## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJ	ECT: SOLO VINO IMPOR	RT, INC. (Name of Corpor	ation)
DOC	UMENT NUMBER: P080	000052346	
		enation for a Corporation	n and fee are submitted for filing
	e return all correspondence cor	•	_
	HELE BOSCO	C	Ū
	(Name of Person	on)	
,	6.11	0/4/201	
	Name of Firm/Co	### ##################################	•
283	40 TRAILS EDGE BLVD, #9		
	(Address)		
BON	NITA SPRINGS, FL 34134		
	(City/State and Zip	Code)	
For fi	orther information concerning	this matter, please call:	
MICI	HELE BOSCO	at ( 239	384-0525
<del></del>	(Name of Person)	(Area Cod	384-0525 e & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made	e payable to the Florida	Department of State.
Amer Divis Clifto 2661	t Address: Independent Section It ion of Corporations In Building Executive Center Circle In Independent Section 1	Mailing Address: Amendment Section Division of Corporatio Post Office Box 6327 Tallahassee, FL 32314	ns 4

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION AUG 14 PH 3: 39

SECRETARY DE STATE TALEARASSEE, FLORIDA

I, MONICA FUSCHI	, hereby resign as DIRECTOR	
~,	(Title)	
of SOLO VINO IMPORT, INC.		
(Name	e of Corporation)	
P08000052346 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	·	
Maica		
(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