PD8000077824

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doce	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



900447440109

03/26/25--01026--006 **35.00

TRANSMITTAL LETTER

SUBJECT: (Name	of Cor	poration)
DOCUMENT NUMBER: P08000077824		
The enclosed Officer/Director Resignation for a C	orpora	tion and fee are submitted for filing
Please return all correspondence concerning this r	natter t	o the following:
ALEXANDER EYNIS		
(Name of Person)		<u> </u>
ATTORNEY		
(Name of Firm/Company)		·
20200 WEST DIXIE HIGHWAY, SUITE 902		
(Address)		
AVENTURA, FLORIDA 33180		
(City/State and Zip Code)		
For further information concerning this matter, ple	ease ca	11:
ALEXANDER EYNIS	305	935-4079
(Name of Person)	(Area C	935-4079) Code & Daytime Telephone Number)

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

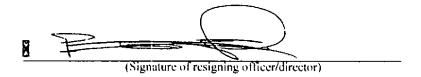
ETAKE OF STAIR

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

PABLO ENGELL L	DIRECTOR & VICE-PRESIDENT, hereby resign as
	(Title)
ENMAJO INC.	
	ne of Corporation)
P08000077824	, a corporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	
	 '



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

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