## P080000923//

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Alesign Neuro 12-1-08

## **COVER LETTER**

SUBJECT: NV PROFFESIONAL SERVICES INC (Name of Corporation) P08000092311 **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: ALEJANDRO QUEUPUMIL (Name of Person) NV PROFFESIONAL SERVICES INC (Name of Firm/Company) 4410 W 16TH AVE SUITE 8-A (Address) **HIAEAH, FL 33012** (City/State and Zip Code) For further information concerning this matter, please call: ALEJANDRO QUEUPUMIL (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: **Mailing Address:** Amendment Section
Division of Corporations Amendment Section Division of Corporations Post Office Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



OMAR TOLEDO	hereby resign as PRESIDENT	
,	(Title)	
NV PROFFESIONAL SERVICES INC		
(Name of Corporati	on)	
P08000092311, a corpor	ration organized under the laws of the State of	
FLORIDA		
( and	Son	
(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