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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CSV5 Corporation  
(Name of Corporation)

**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:

Sharon Valverde  
(Name of Person)

CSV5 Corporation / DSA Astra Pizza  
(Name of Firm/Company)

2915 16<sup>th</sup> St. N. St. Pete, FL 33704  
(Address)

St Petersburg, FL 33704  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon Valverde at ( 727 ) 776-1133  
(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:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Sharon Valverde, hereby resign as Vice President  
(Title)

of CSV5  
(Name of Corporation)

-, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Sharon Valverde  
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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**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