

P08000109883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

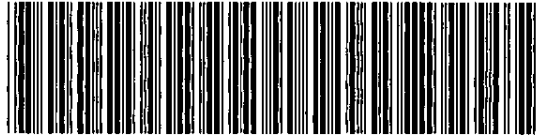
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D
Resign.
2/6/09
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CLUB REMIX INC
(Name of Corporation)

DOCUMENT NUMBER: P08000109883

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NOE GOMEZ

(Name of Person)

CLUB REMIX INC

(Name of Firm/Company)

3215 SOUTH US HWY 1

(Address)

FORT PIERCE, FL 34982

(City/State and Zip Code)

For further information concerning this matter, please call:

NOE GOMEZ

(Name of Person)

at (772) 332-4563

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MIGUEL A VAZQUES, hereby resign as DIRECTOR
(Title)

of CLUB REMIX INC.
(Name of Corporation)

P08000109883, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Miguel de Jesus
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN 26 AM 11:03

FILED

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