

PD9000008291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

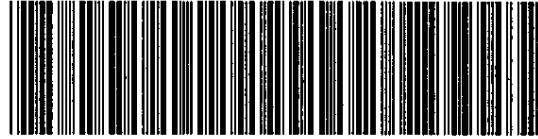
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
14 SEP 18 AM 11:26

C. Lewis
9-25-14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EPIFANI PRO, Corp.
(Name of Corporation)

DOCUMENT NUMBER: P09000008291

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

Please return all correspondence concerning this matter to the following:

JORGE CONTULIANO
(Name of Person)

EPIFANI PRO, Corp.
(Name of Firm/Company)

6035 N.W. 87 AVE
(Address)

MIAMI, FL. 33178
(City/State and Zip Code)

For further information concerning this matter, please call:

NICOLA EPIFANI at (718) 832 4664
(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

9/15/14.

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

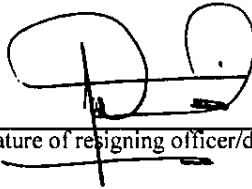
14 SEP 18 AM 11:26

I, JORGE PONTULIANO, hereby resign as OFFICER & SECRETARY
(Title)

of EPIFANI PRO, CORP.
(Name of Corporation)

P09000008291, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

9-15-14.

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