

P09000022904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

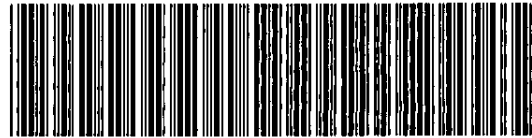
(Business Entity Name)

(Document Number)

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TALLAHASSEE FL 32399

O/D Resign.

11/9/11

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROSIER ENTERPRISE CORPORATION AND TAX SERVICES
(Name of Corporation)

DOCUMENT NUMBER: P09000022904

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

Please return all correspondence concerning this matter to the following:

LIDY ROSIER

(Name of Person)

ROSIER ENTERPRISE CORP AND TAX SERV

(Name of Firm/Company)

346 SW 5TH STREET

(Address)

HOMESTEAD, FL 33030

(City/State and Zip Code)

For further information concerning this matter, please call:

VICTORIO ROSIER

(Name of Person)

at (305) 508-0565

(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, LIDY ROSIER, hereby resign as OFFICER
(Title)

of ROSIER'S ENTERPRISE CORPORATION AND TAX SERVICES,
(Name of Corporation)

P09000022904, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Lidy Rosier
(Signature of resigning officer/director)

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NOV -4 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, 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