

P09000088820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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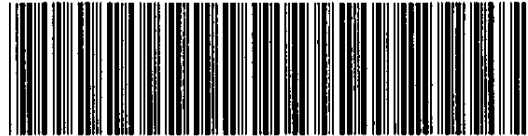
(Business Entity Name)

(Document Number)

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o/o Resignation

JUN 30 2015

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JJ Membribe Corp.
(Name of Corporation)

DOCUMENT NUMBER: P09000088820

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

Please return all correspondence concerning this matter to the following:

Natalia R. Membribe
(Name of Person)

JJ Membribe Corp.
(Name of Firm/Company)

484 East 27 Street
(Address)

Hialeah, FL 33013
(City/State and Zip Code)

For further information concerning this matter, please call:

Natalia R. Membribe at (305) 803-0128
(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

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SECTION OF STATE
TALLAHASSEE, FL 32301

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Natalia R. Membribe, hereby resign as Vice-President
(Title)

of JJ Membribe Corp.
(Name of Corporation)

P09000088820, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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

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SECRETARY OF STATE
TALLAHASSEE, FL 32314