P10000026036

	questor's Name)	<u>, , , , , , , , , , , , , , , , </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
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(Dc	cument Number)	
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MAR 1 4 2012 **T. BROWN**

COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: OFFICER RESIGNATION

(Name of Corporation)

DOCUMENT NUMBER: P10000026036

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

Please return all correspondence concerning this matter to the following:

NAWFAL AMRANI

(Name of Person)

CONTINENTAL HA, INC

(Name of Firm/Company)

41-01 B BROADWAY #325

(Address)

ASTORIA, NY 11103

(City/State and Zip Code)

For further information concerning this matter, please call:

NAWFAL AMRANI at (_____561

(Name of Person)

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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

NAWFAL AMRANI	 OFFICI	ER / DIRECTOR RESIGNATI FOR A CORPORATION	ON ZOIZMAR 12 TALLAHASSEE.FL
CONTINENTAL HA, INC (Name of Corporation) 210000026036 (Document Number, if known) FLORTAA		, hereby resign as	EPRESIDENT
(Document Number, if known) <u>FLORTAA</u> .	(1	•	ne laws of the State of
(Signature 6) tesigning officer/director)	(Document Number, if known)	, a corporation organized under u	ie laws of the state of
	-J.	(Signature oversigning officer/director)	

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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