P1000054587

	(Requestor's Name)	
	(Address)	
<u> </u>	(Address)	
		e #)
PICK.	Misc	MAIL
	(Business Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instruction	ns to Filing Officer:	





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R. WHATE MAY 29 2020 2020 ETT 12 FATT: 25

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	•	
SUBJECT: SGA MANAGEMENT, INC.		
	(Name of Corporation)	
DOCUMENT NUMBER: P10000054587		
The enclosed Officer/Director Resignation F	or a Corporation and fee are submitted for filing	
Please return all correspondence concerning	this matter to the following:	
Seriozha Sergio Gonzalez		
(Name of Person)		
SGA MANAGEMENT, INC.		
(Name of Firm/Company)		
15055 001 114 075 2 30 1		
(Address)		
MIAMI, FL 33186		
(City/State and Zip Code)		
For further information concerning this mat		
Seriozha Segio Gonzalez	at () 975-8694 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35,00 made payable	le to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E044 (05/13)

P.O. Box 6327

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Seriozha Sergio Gonzalez VP 1,, hereby resign as		
**	(Title)	
SGA MANAGEMENT, INC.		
(Na	me of Corporation)	
P10000054587	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
	·	
	(Signalure of resigning officer-director) 288 178 178 178 178 178 178 178	

Make checks payable to Florida Department of State and mail to:

FILING FEE 18 \$35,00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314