

P10000055578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

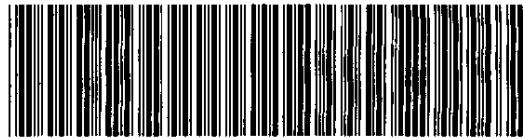
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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[Handwritten signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SIESTA ENTERTAINMENT INC

DOCUMENT NUMBER: P10000055548

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORDI R TORRENTS

Name of Contact Person

JORDI R TORRENTS P A

Firm/ Company

2655 LE JEUNE ROAD SUITE 804

Address

CORAL GABLES FL 33134

City/ State and Zip Code

JORDI.TORRENTS@TORRENTSLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JORDI R TORRENTS

Name of Contact Person

at (305)

446-6244

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

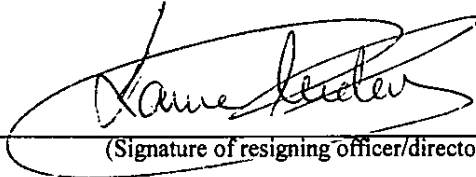
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, PONSA, LAURA DERDAM, hereby resign as PSTD
(Title)

of SIESTA ENTERTAINMENT INC
(Name of Corporation)

P10000055548, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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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