

P10000075810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CUCCIDATO, INC.

(Name of Corporation)

DOCUMENT NUMBER: P10000075810

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

Please return all correspondence concerning this matter to the following:

ALEXANDER L. DOMB

(Name of Person)

ALEXANDER L. DOMB, P.A.

(Name of Firm/Company)

4755 TECHNOLOGY WAY, SUITE 205

(Address)

BOCA RATON, FLORIDA 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

ALEXANDER DOMB

(Name of Person)

at (561) 347-6000

(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, ALEXANDER L. DOMB, hereby resign as DIRECTOR
(Title)

of CUCCIDATO, INC.
(Name of Corporation)

P10000075810, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
2019 NOV 17 AM 10:29
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