

P1000008294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

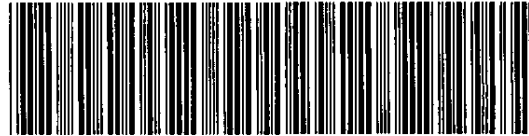
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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300273722803

Resignation
DB Officer

300273722803
06/11/15--01016--018 **35.00

FILED
2015 JUN 11 PM 3:56
CLERK OF STATE
TALLAHASSEE, FLORIDA

JUN 19 2015
K RAMSEY

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RULAX CONSTRUCTION GROUP, INC.
(Name of Corporation)

DOCUMENT NUMBER: P10000081294

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

Please return all correspondence concerning this matter to the following:

LAXISVONI GARCIA

(Name of Person)

N/A

(Name of Firm/Company)

3661 SW 3rd STREET, APT 6

(Address)

MIAMI, FL. 33135

(City/State and Zip Code)

For further information concerning this matter, please call:

LAXISVONI

(Name of Person)

at (786) 315 7442

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2015 JUN 11 PM 3:56

CLERK OF STATE
TALLAHASSEE, FLORIDA

I, LAXISVONI GARCIA, hereby resign as DIRECTOR
(Title)

of RULAX CONSTRUCTION GROUP, INC.
(Name of Corporation)

P10000081294, 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