P10000083491

(Re	equestor's Name)	
(Ac	ldress)	· · · · · · · · · · · · · · · · · · ·
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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04/18/11--01036--013 **35.00

My / Rio Resign



Th 4-20-4

COVER LETTER

Amendment Section Division of Corporations

TO:

	()	lame of Corpo	oration)	
DOCUMENT NUMBER:	P1000008349	1		
The enclosed Officer/Director	Resignation for	a Corporatio	on and fee are sub	mitted for filing
Please return all corresponden	ce concerning th	is matter to	the following:	
SANDY ZORRILLA				
(Name o	f Person)		_	
ZORRILLA PAINTING CO	RPORATION			
(Name of Fig	m/Company)		_	
3310 NW 21 AVENUE				
(Add	ress)		_	
MIAMI, FLORIDA 33142				
(City/State a	nd Zip Code)		_	•
For further information concer	ning this matter	, please call:		
SANDY ZORRILLA	ş	305	300-4899 de & Daytime Tele	
(Name of Person	1)	(Area Co	de & Daytime Tele	phone Number)

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



DOMINGA RAMOS	, hereby resign as	VICE-PRESIDENT	The state of the s
·,	, nereby resign as	(Title)	
of ZORRILLA PAINTING C	CORPORATION		
v	(Name of Corporation)		
P1000083491 (Document Number, if known		nder the laws of the State of	•
(Document Number, it 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