

PI10000026240

(Requestor's Name)

(Address)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Loretta Morelli PA
(Name of Corporation)

DOCUMENT NUMBER: P11000026240

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

Please return all correspondence concerning this matter to the following:

Loretta Morelli

(Name of Person)

Loretta Morelli PA

(Name of Firm/Company)

620 SW Yacht Basin Way

(Address)

Stuart F 34997

(City/State and Zip Code)

For further information concerning this matter, please call:

Loretta Morelli

(Name of Person)

at (561) 714 4347

(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, Ben Morelli, hereby resign as Vice President
(Title)

of Loretta Morelli PA
(Name of Corporation)

P11000026240, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

12 JUL -9 AM 8:53
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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