

P110000048077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

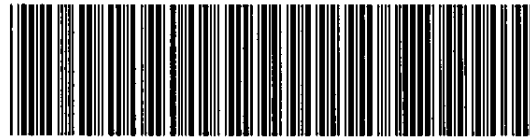
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **DEAR CONSULTORA CORP**
(Name of Corporation)

DOCUMENT NUMBER: **P11000048077**

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

Please return all correspondence concerning this matter to the following:

NELSON ODELLA

(Name of Person)

LENSUR CONSULTING GROUP

(Name of Firm/Company)

6187 NW 167 ST H20

(Address)

MIAMI FLORIDA 33015

(City/State and Zip Code)

For further information concerning this matter, please call:

NELSON

(Name of Person)

at **305 4390246**

(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**

I, CRYSTAL SALOMON, hereby resign as SECRETARY
(Title)

of DEAR CONSULTORA CORP
(Name of Corporation)

P11000048077, 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

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