P11000098574

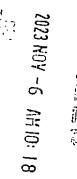
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to riving Officer.		
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

Roberta Alba International Development C SUBJECT:	Consulting, Corp
(Na	ame of Corporation)
DOCUMENT NUMBER: P11000098574	
The enclosed Officer/Director Resignation for a	a Corporation and fee are submitted for filing
Please return all correspondence concerning this	is matter to the following:
Roberta Alba	
(Name of Person)	·
Roberta Alba International Development Consulting, Cor	гр
(Name of Firm/Company)	· · · · · · · · · · · · · · · · · · ·
6540 NW 170 Terrace	
(Address)	
Miami, FL 33015	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
Roberta Alba at	(Area Code & Daytime Telephone Number)
(Name of Person)	(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Manager by resign as
(Title)
organized under the laws of the State of
g officer/director)
•

FILING FEE 18 \$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 023 NOV -6 AM 10: 18