P11000/05/60

(Re	questor's Name)	
.(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TALLAHASSEE FROMINA



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 12, 2017

MAUNÃO PAYAN M PAYAN PA 16686 GOLFVIEW DRIVE WESTON, FL 33326

SUBJECT: M PAYAN PA Ref. Number: P11000105160 Please note 100 have mispelled name it is mauricio

We have received your document for M PAYAN PA and check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 417A00011801

T JUL -3 PM 3:27

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: M Payan PA (Name of Corporation)
DOCUMENT NUMBER: P(1 000105/60
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maunao Payan (Name of Person)
M Payan PA (Name of Firm/Company)
16686 GOIFVIEW DT (Address)
Weston P1 33326
(City/State and Zip Code)
For further information concerning this matter, please call:
Mamco Payan at 954, 549 8323 (Name of Person) at (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
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Melinda Payan, hereby resign as Preside	·V+		
of M Payan PA	itle)	,	
(Name of Corporation) P 000 05 60 (Document Number, if known), a corporation organized under the laws of the	: State of		
Florida			
0			
(Signature of resigning officer/director)			
	SHEETA	17 JUN -	
FILING FEE IS \$35.00		8	CO

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to: