## P12000034926

(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:	





000357908640

01/12/21--01011--028 ++85.60

2021 JUNI 12 PHI2: 43

LESTA SOSI

## TRANSMITTAL LETTER

SUBJECT.	JBJECT: (Name of Corporation)				
DOCUMENT NUMBER: P12000034926					
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for fili				
Please return all correspondence concerni	ng this matter to the following:				
Carlos Martinez					
(Name of Person)					
Carlos Martinez & Associates					
(Name of Firm/Company	<del>()</del>				
12001 SW 128th Ct Ste 102					
(Address)	<del></del>				
Miami, FL 33186					
(City/State and Zip Code	)				
For further information concerning this ma	atter, please call:				
Marilyn Zorrilla	305 387-0076				
(Name of Person)	at ( ) 305 387-0076 (Area Code & Daytime Telephone Number)				
Enclosed is a check for \$35.00 made paya	ble to the Florida Department of State.				
Mailing Address:	Street Address:				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Amendment Section Division of Corporations

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Valeria Salazar I	AMBR , hereby resign as		
••	, hereby resign as	(Title)	
Osher Group Corp			
4)	lame of Corporation)		
P12000034926	, a corporation organized unde	r the laws of the State of	
(Document Number, if known)	•		
Florida			
,	, , , , ,	)	

FILING FEE IS \$35.00

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

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