

P12 000038313

(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:

Office Use Only



400285197554

05/02/16--01009--020 \*\*35.00

FILED  
2016 MAY -2 AM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/4/16

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Lobe Ventures Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P12000038313

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

Please return all correspondence concerning this matter to the following:

Manuel Losa - C/O Brian George  
(Name of Person)

Calas Group  
(Name of Firm/Company)

2000 Ponce de Leon Blvd. 6th Floor  
(Address)

Coral Gables, FL 33134  
(City/State and Zip Code)

For further information concerning this matter, please call:

Manuel Losa at ( 786 ) 253-7501  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

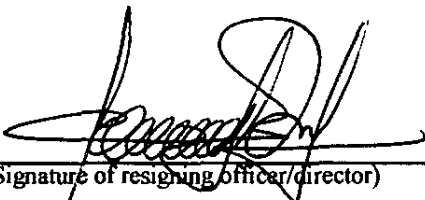
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Manuel Losa, hereby resign as Director  
(Title)

of Lobe Ventures Inc  
(Name of Corporation)

P12000038313, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

FILED  
2008 MAY -2 AM 10:17  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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