

712000039890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

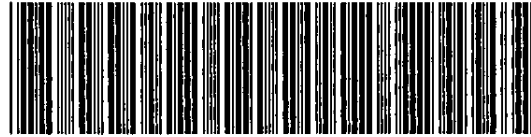
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300243450243

01/09/13--01019--002 **35.00

FILED
13 JAN -9 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature and date 1-11-13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DIBER SUPPLIES INC.
(Name of Corporation)

DOCUMENT NUMBER: P12000039890

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

Please return all correspondence concerning this matter to the following:

CARLOS GARCIA
(Name of Person)

(Name of Firm/Company)

10025 NW 116 WAY #17
(Address)

MEDLEY, FL 33178
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS GARCIA at (305) 477 4750
(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

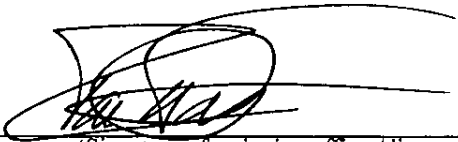
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, CARLOS GARCIA, hereby resign as DIRECTOR
(Title)

of DIBER SUPPLIES INC.
(Name of Corporation)

P12000039890, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

FILED
13 JAN -9 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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