P16000053699

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
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SECRETARY OF STATE



TRANSMITTAL LETTER

	Division of Corporations		
	SUBJECT: YDEAL, INC.		
	(Name of Corporation) DOCUMENT NUMBER: P12000052699		
	The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing		
	Please return all correspondence concerning this matter to the following:		
MIGUEL MUNOZ			
	(Name of Person)		
	YDEAL, INC.		
	(Name of Firm/Company)		
,	13518 Lakers Court		
	(Address)		
	ORLANDO, FL 32828		
	(City/State and Zip Code)		
	For further information concerning this matter, please call:		
	MIGUEL MUNOZ (Name of Person) at (321) 377-6577 (Area Code & Daytime Telephone Number)		
	(Name of Person) (Area Code & Daytime Telephone Number)		
, 1	Enclosed is a check for \$35.00 made payable to the Florida Department of State.		
	Molling Address: Street Address:		
	Mailing Address: Amendment Section Division of Compositions Street Address: Amendment Section Division of Compositions		
	Division of Corporations P.O. Box 6327 Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301		

CR2E044 (05/13)

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

LUIS MUNOZ	hereby resign as Vice-President
	(Title)
of YDEAL, INC.	
(Nan	e of Corporation)
P12000052699	a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	
	
1	~ 1

(Signature of resigning officer/director)

FILED MIN FEB 29 P 2: 55 SECRETARY OF STATE

FILING FEE IS \$35.00

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

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