P12000054563

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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15 HAY 19 PH 3: 37

SECRETARY OF STATE

MAY 2 6 2015 T CANNON

TRANSMITTAL LETTER

Unloathe Corp **SUBJECT:** (Name of Corporation) P12000054563 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marc Haime (Name of Person) (Name of Firm/Company) 19950 W Country Club Dr # 902 (Address) Aventura, FL 33180 (City/State and Zip Code) For further information concerning this matter, please call: Marc Haime 305 733-9050 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address:
Amendment Section Amendment Section Division of Corporations Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301 P.O. Box 6327 Tallahassee, FL 32314

TO:

Amendment Section
Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 MAY 19 PM 3: 37

Marc Haime	Manager	
I,	, hereby resign as	
	(Title)	
Unloathe Corp		
of	(Name of Corporation)	
	(Name of Corporation)	
P12000054563		
	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
Tiorida		
	 '	
	Manfai	
	(Signature of resigning officer/director)	

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