## P1200063903

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of St	atus				
Special Instructions to Filing Officer.					
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03/09/15--01048--612 \*\*35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



## TRANSMITTAL LETTER

SUBJECT: Alpha Marble & Granite, Inc. (Name of Corporation)
DOCUMENT NUMBER: P1200063903
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melly McCornick, (Name of Person)
Alpha Marble & Grante Inc (Name of Firm/Company) C/o yelanda Hauros 4796 Sugar Pine Drive (Address)
4796 Sugar Pine Drive
Boca Ration, 4L 33487 (City/State and Zip Code)
For further information concerning this matter, please call:
Melly McCormick at (954) 798-3353 (Area Code & Daytime Telephone Number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations

TO:

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ι,	Nelly McCorr	Muck, hereby	resign as	5 P (Title)
of	Alpha Mark	e of Corporation)	ite, Inc	,
	200063903 Document Number, if known)			laws of the State of
<u></u> - 닉	-lorida	·		

(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 15 MAR -9 PM 3: 1

AND