

P12000066331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

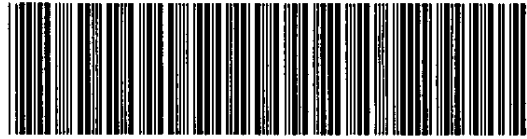
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
14 DEC 16 AM 9:35

C.L.
12-19-14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INVERSIONES SULSALUD, INC.
(Name of Corporation)

DOCUMENT NUMBER: P12000066331

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 E. SULBARAN PEREZ
(Name of Person)

INVERSIONES SULSALUD, INC
(Name of Firm/Company)

8285 NW 64TH STREET UNIT 2
(Address)

MIAMI, FL. 33166
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS E SULBARAN PEREZ at (305) 767-9132
(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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS


14 DEC 16 AM 9:35

I, ALEXANDER GOZZO, hereby resign as PRESIDENT
(Title)

of INVERSIONES SULSALUD, INC.
(Name of Corporation)

P12000066331, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(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