P/200000723980

(Re	questors Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

TO: Amendment Section - www. Division of Corporations

JURIECT, VAUGHN ALAINE-MARSHALL, INC.

(Name of Corporation)

DOCUMENT NUMBER: P12000072980

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

Please return all correspondence concerning this matter to the following:

MICHAEL ALCANTARA

(Name of Person)

VAUGHN ALAINE- MARSHALL, INC.

(Name of Firm/Company)

495 NE 4TH STREET SUITE 7

(Address)

DELRAY BEACH, FL. 33483

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL ALCANTARA ", 561 \ 865-6151

(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

, JACQUELINE JIME	NENEZ, hereby resign as		
7	, <u>,</u> <u>.</u>	(Tit	ile)
of VAUGHN ALAINE-		C.	,
	e of Corporation)		
P12000072980 (Document Number, if known)	, a corporation organized un	der the laws of the	State of
FLORIDA			
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	equeline line	nen	ਦ
0 (Signature of resigning officer/direc	.01)	12 0 SEC:
			AHA AHA
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•			T'S
	FILING FEE IS \$35.00		ORIGINAL ORI

Amendment Section Division of Corporations P.O. Box 6327

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

Tallahassee, Florida 32314

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