

P12000097421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: VINCENT GAROFOLA, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P12000097421

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

Please return all correspondence concerning this matter to the following:

DOUGLAS E. TODD  
(Name of Person)

VINCENT GAROFOLA, INC.  
(Name of Firm/Company)

1624 W. TERRACE DR.  
(Address)

LAKE WORTH, FL 33460  
(City/State and Zip Code)

For further information concerning this matter, please call:

DOUGLAS TODD at ( 561 ) 827-7207  
(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

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

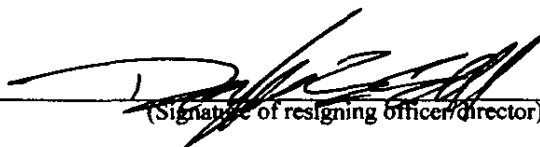
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, DOUGLAS E. TODD, hereby resign as VP & SECRETARY  
(Title)

of VINCENT GAROFOLA, INC.  
(Name of Corporation)

P12000097421, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

14 SEP 17 PM 3:43  
Filing Section  
of the Department of State  
Tallahassee, Florida

**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